Examiners Search notes

Access DB# 157285

SEARCH REQUEST FORM

Scientific and Technical Information Center

Requester's Full Name: Rebecca Cook Examiner #: 69826 Date: 6/22/05

Art Unit: _____ Phone Number 30_____ Serial Number: 10/661,957

Mail Box and Bldg/Room Location: 3C70 Results Format Preferred (circle): PAPER DISK E-MAIL

If more than one search is submitted, please prioritize searches in order of need.

****

Please provide a detailed statement of the search topic, and describe as specifically as possible the subject matter to be searched. Include the elected species or structures, keywords, synonyms, acronyms, and registry numbers, and combine with the concept or utility of the invention. Define any terms that may have a special meaning. Give examples or relevant citations, authors, etc, if known. Please attach a copy of the cover sheet, pertinent claims, and abstract.

Title of invention: _____

Inventors (please provide full names): William Pollman

_____

Earliest Priority Filing Date: _____

**For Sequence Searches Only* Please include all pertinent information (parent, child, divisional, or issued patent numbers) along with the appropriate serial number.*

Please search the compound of claim 1 in Registry (for RN & Chemical names) + Caplus, Medline, Embase & Biosis for known uses.

Thanks
Rebecca

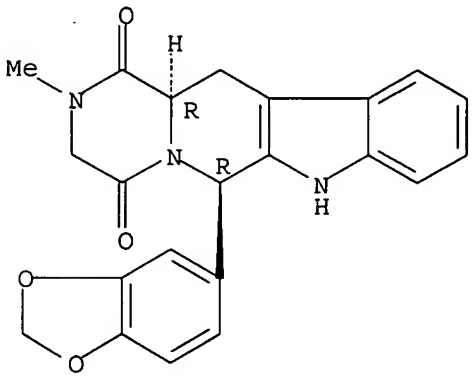
****

STAFF USE ONLY	Type of Search		Vendors and cost where applicable	
Searcher: _____	NA Sequence (#)	_____	STN	_____
Searcher Phone #: _____	AA Sequence (#)	_____	Dialog	_____
Searcher Location: _____	Structure (#)	_____	Questel/Orbit	_____
Date Searcher Picked Up: _____	Bibliographic	_____	Dr.Link	_____
Date Completed: _____	Litigation	_____	Lexis/Nexis	_____
Searcher Prep & Review Time _____	Fulltext	_____	Sequence Systems	_____
Clerical Prep Time: _____	Patent Family	_____	WWW/Internet	_____
Online Time _____	Other	_____	Other (specify)	_____

PTO-1590 (8-01)

L47 ANSWER 1 OF 1 REGISTRY COPYRIGHT 2005 ACS on STN
RN **171596-29-5** REGISTRY
ED Entered STN: 21 Dec 1995
CN Pyrazino[1',2':1,6]pyrido[3,4-b]indole-1,4-dione, 6-(1,3-benzodioxol-5-yl)-2,3,6,7,12,12a-hexahydro-2-methyl-, (6R,12aR)- (9CI) (CA INDEX NAME)
OTHER CA INDEX NAMES:
CN Pyrazino[1',2':1,6]pyrido[3,4-b]indole-1,4-dione, 6-(1,3-benzodioxol-5-yl)-2,3,6,7,12,12a-hexahydro-2-methyl-, (6R-trans)-
OTHER NAMES:
CN (6R,12aR)-2,3,6,7,12,12a-hexahydro-2-methyl-6-(3,4-methylenedioxyphenyl)pyrazino[1',2':1,6]pyrido[3,4-b]indole-1,4-dione
CN Cialis
CN GF 196960
CN IC 351
CN ICOS 351
CN Tadalafil
FS STEREOSEARCH
DR 240822-07-5, 282541-36-0
MF C22 H19 N3 O4
CI COM
SR CA
LC STN Files: ADISINSIGHT, ANABSTR, BIOSIS, BIOTECHNO, CA, CAPLUS, CASREACT, CBNB, CHEMCATS, CIN, DIOGENES, EMBASE, IMSDRUGNEWS, IMSPATENTS, IMSRESEARCH, IPA, MRCK*, PATDPASPC, PHAR, PROMT, PROUSDDR, PS, SYNTHLINE, TOXCENTER, USAN, USPAT2, USPATFULL
(*File contains numerically searchable property data)

Absolute stereochemistry. Rotation (+).



PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

173 REFERENCES IN FILE CA (1907 TO DATE)
1 REFERENCES TO NON-SPECIFIC DERIVATIVES IN FILE CA
177 REFERENCES IN FILE CAPLUS (1907 TO DATE)
ED Entered STN: 21 Dec 1995

=> d ibib abs hitstr l45 1-2

L45 ANSWER 1 OF 2 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2001:924320 HCAPLUS
DOCUMENT NUMBER: 136:31728
TITLE: Daily treatment for erectile dysfunction using a phosphodiesterase 5 (PDE5) inhibitor
INVENTOR(S): **Whitaker, John S.**; Saenz de Tejada, Inigo; Ferguson, Kenneth M.
PATENT ASSIGNEE(S): USA
SOURCE: U.S. Pat. Appl. Publ., 12 pp., Cont.-in-part of U.S. Ser. No. 558,911.
CODEN: USXXCO
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 3
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 2001053780	A1	20011220	US 2001-834442	20010413
CA 2371684	AA	20001109	CA 2000-2371684	20000426
EP 1173181	A2	20020123	EP 2000-926367	20000426
EP 1173181	B1	20031015		
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO				
US 6451807	B1	20020917	US 2000-558911	20000426
JP 2002543116	T2	20021217	JP 2000-614984	20000426
BR 2000010181	A	20030225	BR 2000-10181	20000426
NZ 514882	A	20030829	NZ 2000-514882	20000426
AT 251908	E	20031115	AT 2000-926367	20000426
AU 769946	B2	20040212	AU 2000-44908	20000426
EP 1415652	A2	20040506	EP 2003-23276	20000426
EP 1415652	A3	20040512		
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HR 2001000778	A1	20021231	HR 2001-778	20011023
NO 2001005275	A	20011206	NO 2001-5275	20011029
HK 1041204	A1	20040305	HK 2002-101474	20020226
US 2003100478	A1	20030529	US 2002-198903	20020719
US 2003144296	A1	20030731	US 2003-341664	20030114
US 2004058929	A1	20040325	US 2003-661951	20030912

PRIORITY APPLN. INFO.:		
US 1999-132036P	P	19990430
US 2000-558911	A2	20000426
EP 2000-926367	A3	20000426
WO 2000-US11129	W	20000426
US 2001-834442	A3	20010413
US 2001-31556	A1	20011019

AB The invention provides phosphodiesterase (PDE) enzyme inhibitors and to their use in pharmaceutical articles of manufacture In particular, the invention provides potent inhibitors of cyclic guanosine 3',5'-monophosphate specific phosphodiesterase type 5 (PDE5) that, when incorporated into a pharmaceutical product at about 1-10 mg unit dosage, are useful for the treatment of sexual dysfunction by daily administration of the PDE5 inhibitor. The articles of manufacture described are characterized by PDE5 inhibition, and accordingly, provide a benefit in therapeutic areas where inhibition of PDE5 is desired, especially erectile dysfunction, with minimization or elimination of adverse side effects resulting from

inhibition of other phosphodiesterase enzymes and with an improvement of vascular conditioning.

IT **9040-59-9P 9068-52-4P**, Phosphodiesterase V
RL: BSU (Biological study, unclassified); PUR (Purification or recovery); BIOL (Biological study); PREP (Preparation)
(phosphodiesterase 5 inhibitor for daily treatment for erectile dysfunction)

RN 9040-59-9 HCAPLUS
CN Phosphodiesterase, cyclic 3',5'-nucleotide (9CI) (CA INDEX NAME)

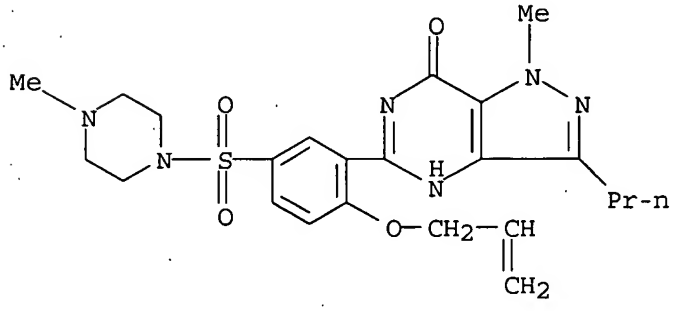
*** STRUCTURE DIAGRAM IS NOT AVAILABLE ***

RN 9068-52-4 HCAPLUS
CN Phosphodiesterase, guanosine cyclic 3',5'-phosphate (9CI) (CA INDEX NAME)

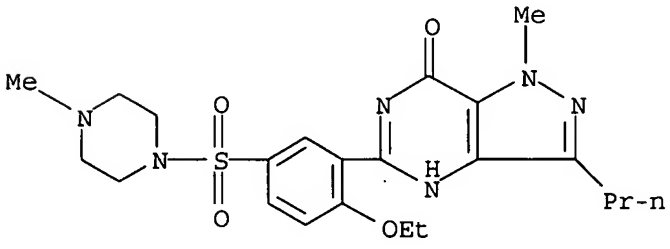
*** STRUCTURE DIAGRAM IS NOT AVAILABLE ***

IT **139755-81-0 139755-83-2**, Sildenafil **139755-84-3**
139755-85-4 139755-87-6 147676-53-7
147676-63-9 147676-79-7 147676-81-1
171596-29-5 171596-40-0 224785-90-4,
Vardenafil
RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(phosphodiesterase 5 inhibitor for daily treatment for erectile dysfunction)

RN 139755-81-0 HCAPLUS
CN Piperazine, 1-[[3-(4,7-dihydro-1-methyl-7-oxo-3-propyl-1H-pyrazolo[4,3-d]pyrimidin-5-yl)-4-(2-propenyloxy)phenyl]sulfonyl]-4-methyl- (9CI) (CA INDEX NAME)



RN 139755-83-2 HCAPLUS
CN Piperazine, 1-[[3-(4,7-dihydro-1-methyl-7-oxo-3-propyl-1H-pyrazolo[4,3-d]pyrimidin-5-yl)-4-ethoxyphenyl]sulfonyl]-4-methyl- (9CI) (CA INDEX NAME)



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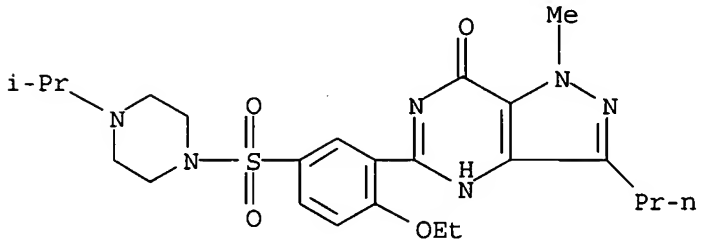
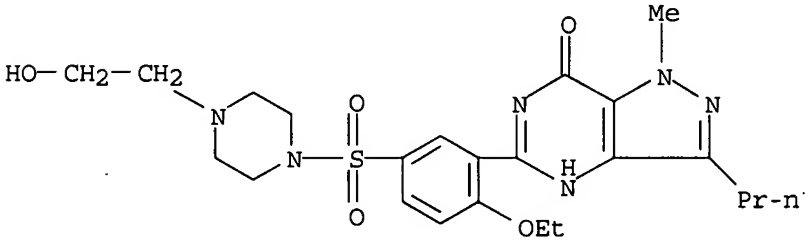


RN 139755-85-4 HCAPLUS
CN 1-Piperazineethanol, 4-[[3-(4,7-dihydro-1-methyl-7-oxo-3-propyl-1H-pyrazolo[4,3-d]pyrimidin-5-yl)-4-ethoxyphenyl]sulfonyl]- (9CI) (CA INDEX NAME)



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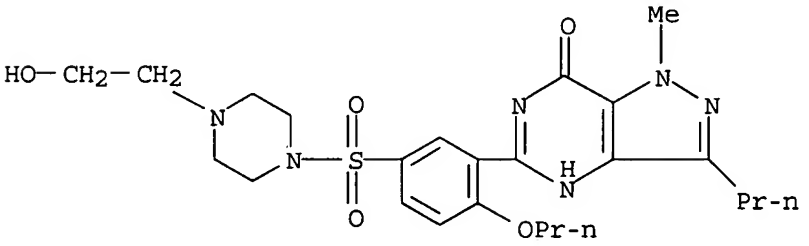
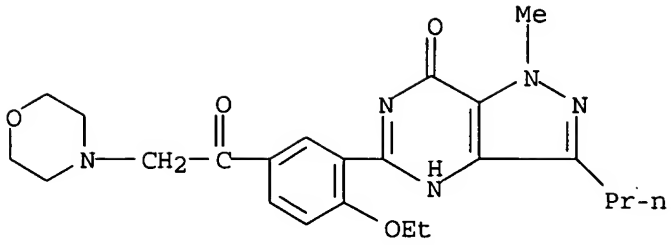
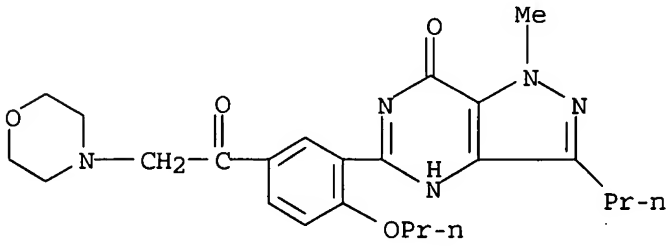


RN 147676-53-7 HCAPLUS
CN 7H-Pyrazolo[4,3-d]pyrimidin-7-one, 5-[2-ethoxy-5-(4-morpholinylacetyl)phenyl]-1,4-dihydro-1-methyl-3-propyl- (9CI) (CA INDEX NAME)



RN 147676-63-9 HCAPLUS
CN 7H-Pyrazolo[4,3-d]pyrimidin-7-one, 1,4-dihydro-1-methyl-5-[5-(4-morpholinylacetyl)-2-propoxyphenyl]-3-propyl- (9CI) (CA INDEX NAME)



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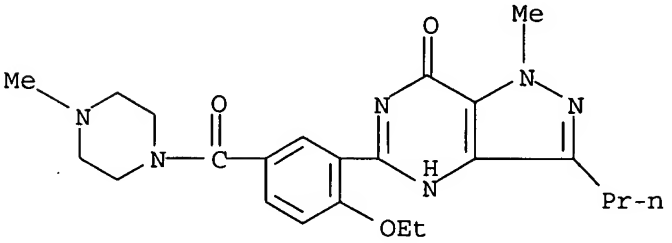
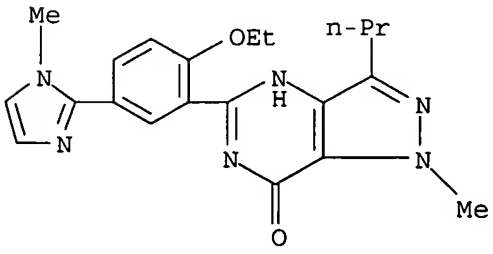
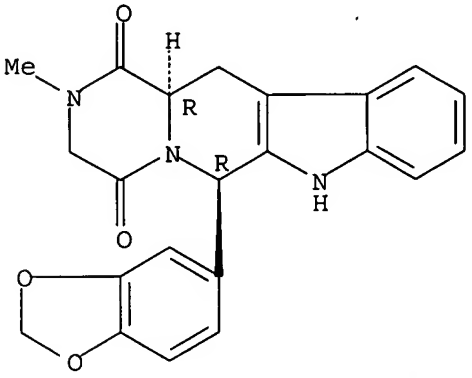


RN 147676-81-1 HCAPLUS
CN 7H-Pyrazolo[4,3-d]pyrimidin-7-one, 5-[2-ethoxy-5-(1-methyl-1H-imidazol-2-yl)phenyl]-1,4-dihydro-1-methyl-3-propyl- (9CI) (CA INDEX NAME)



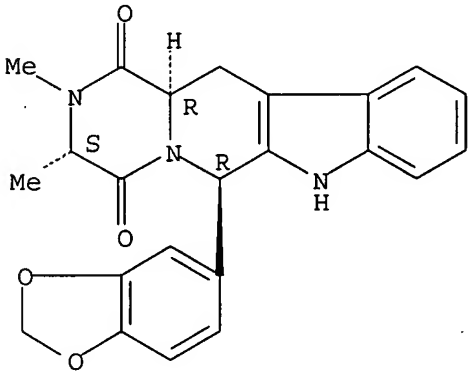
RN 171596-29-5 HCAPLUS
CN Pyrazino[1',2':1,6]pyrido[3,4-b]indole-1,4-dione, 6-(1,3-benzodioxol-5-yl)-2,3,6,7,12,12a-hexahydro-2-methyl-, (6R,12aR)- (9CI) (CA INDEX NAME)

Absolute stereochemistry. Rotation (+).

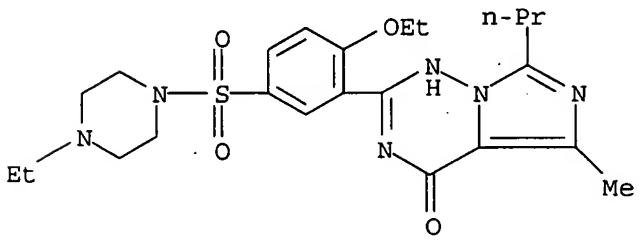


RN 171596-40-0 HCAPLUS
CN Pyrazino[1',2':1,6]pyrido[3,4-b]indole-1,4-dione, 6-(1,3-benzodioxol-5-yl)-2,3,6,7,12,12a-hexahydro-2,3-dimethyl-, (3S,6R,12aR)- (9CI) (CA INDEX NAME)

Absolute stereochemistry. Rotation (+).



RN 224785-90-4 HCAPLUS
CN Piperazine, 1-[[3-(1,4-dihydro-5-methyl-4-oxo-7-propylimidazo[5,1-f][1,2,4]triazin-2-yl)-4-ethoxyphenyl]sulfonyl]-4-ethyl- (9CI) (CA INDEX NAME)



L45 ANSWER 2 OF 2 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2001:798055 HCAPLUS
DOCUMENT NUMBER: 135:339295
TITLE: Daily treatment for erectile dysfunction using a phosphodiesterase 5 (PDE5) inhibitor
INVENTOR(S): **Whitaker, John S.**; Saenz de Tejada, Inigo; Ferguson, Kenneth M.
PATENT ASSIGNEE(S): Lilly Icos LLC, USA
SOURCE: PCT Int. Appl., 48 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 3
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001080860	A2	20011101	WO 2001-US12512	20010413
WO 2001080860	A3	20020606		
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG				
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CA 2407519	AA	20011101	CA 2001-2407519	20010413
EP 1276481	A2	20030122	EP 2001-927133	20010413
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR				
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JP 2003531174	T2	20031021	JP 2001-577959	20010413
NZ 521869	A	20041029	NZ 2001-521869	20010413
NO 2002005138	A	20021216	NO 2002-5138	20021025
ZA 2002008776	A	20030603	ZA 2002-8776	20021030

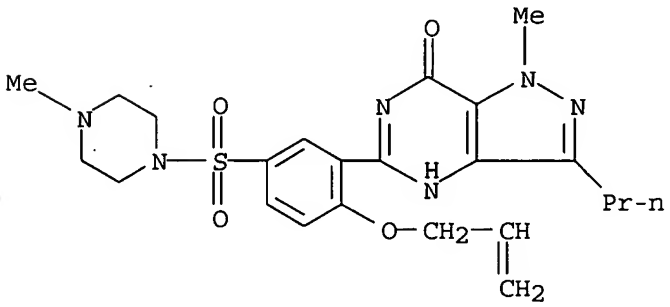
PRIORITY APPLN. INFO.:	US 2000-558911	A	20000426
	US 1999-132036P	P	19990430
	WO 2001-US12512	W	20010413

AB The invention relates to phosphodiesterase (PDE) enzyme inhibitors and to their use in pharmaceutical articles of manufacture In particular, the invention relates to potent inhibitors of cyclic guanosine 3',5'-monophosphate-specific phosphodiesterase type 5 (PDE5) that, when incorporated into a pharmaceutical product at about 1 to about 10 mg unit dosage, are useful for the treatment of sexual dysfunction by daily administration of the PDE5 inhibitor. The articles of manufacture are characterized by PDE5 inhibition, and accordingly provide a benefit in therapeutic areas where inhibition of PDE5 is desired, especially erectile dysfunction, with minimization or elimination of adverse side effects resulting from inhibition of other phosphodiesterase enzymes and with an improvement of vascular conditioning.

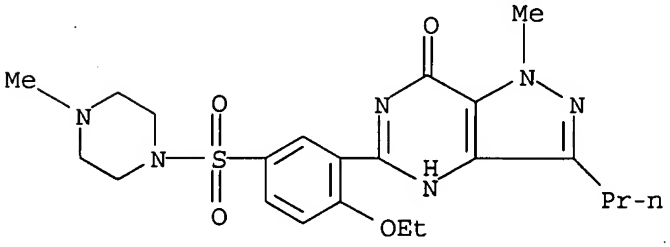
IT **9040-59-9P**, 3',5'-Cyclic nucleotide phosphodiesterase
RL: BSU (Biological study, unclassified); PUR (Purification or recovery); BIOL (Biological study); PREP (Preparation)
(isoform 1c; phosphodiesterase 5 inhibitor for daily treatment for

sexual dysfunction)
RN 9040-59-9 HCAPLUS
CN Phosphodiesterase, cyclic 3',5'-nucleotide (9CI) (CA INDEX NAME)

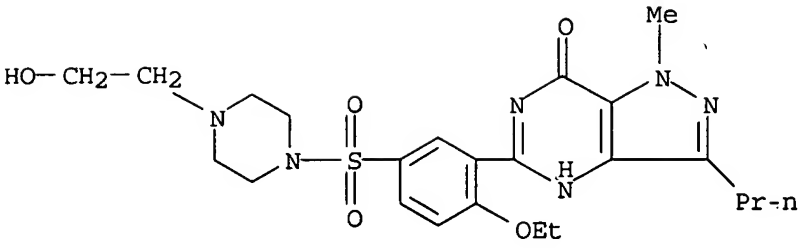
*** STRUCTURE DIAGRAM IS NOT AVAILABLE ***
IT **139755-81-0 139755-83-2 139755-85-4**
139755-87-6 147676-53-7 147676-63-9
147676-79-7 147676-81-1 171596-29-5
171596-40-0 224785-90-4, Vardenafil
RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(phosphodiesterase 5 inhibitor for daily treatment for sexual dysfunction)
RN 139755-81-0 HCAPLUS
CN Piperazine, 1-[[3-(4,7-dihydro-1-methyl-7-oxo-3-propyl-1H-pyrazolo[4,3-d]pyrimidin-5-yl)-4-(2-propenyloxy)phenyl]sulfonyl]-4-methyl- (9CI) (CA INDEX NAME)



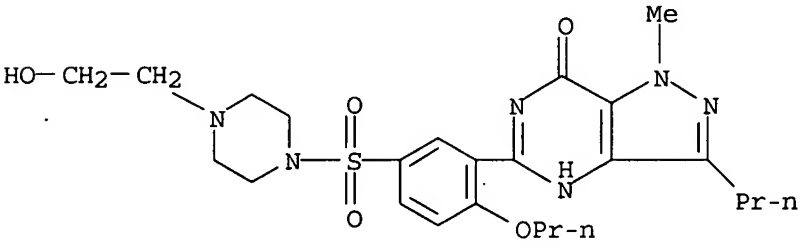
RN 139755-83-2 HCAPLUS
CN Piperazine, 1-[[3-(4,7-dihydro-1-methyl-7-oxo-3-propyl-1H-pyrazolo[4,3-d]pyrimidin-5-yl)-4-ethoxyphenyl]sulfonyl]-4-methyl- (9CI) (CA INDEX NAME)



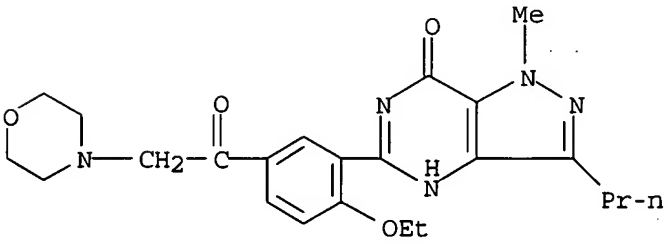
RN 139755-85-4 HCAPLUS
CN 1-Piperazineethanol, 4-[[3-(4,7-dihydro-1-methyl-7-oxo-3-propyl-1H-pyrazolo[4,3-d]pyrimidin-5-yl)-4-ethoxyphenyl]sulfonyl]- (9CI) (CA INDEX NAME)



RN 139755-87-6 HCAPLUS
CN 1-Piperazineethanol, 4-[[3-(4,7-dihydro-1-methyl-7-oxo-3-propyl-1H-pyrazolo[4,3-d]pyrimidin-5-yl)-4-propoxyphenyl]sulfonyl]- (9CI) (CA INDEX NAME)



RN 147676-53-7 HCAPLUS
CN 7H-Pyrazolo[4,3-d]pyrimidin-7-one, 5-[2-ethoxy-5-(4-morpholinylacetyl)phenyl]-1,4-dihydro-1-methyl-3-propyl- (9CI) (CA INDEX NAME)



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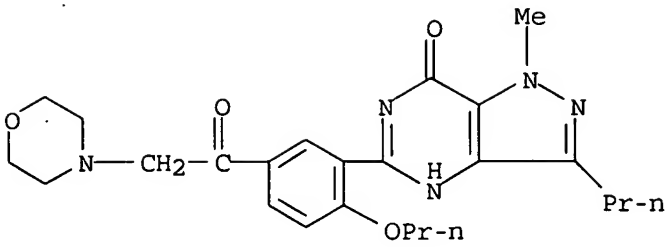
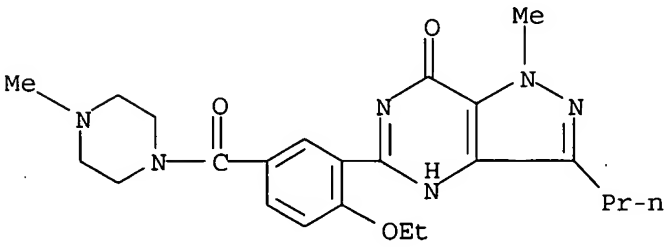
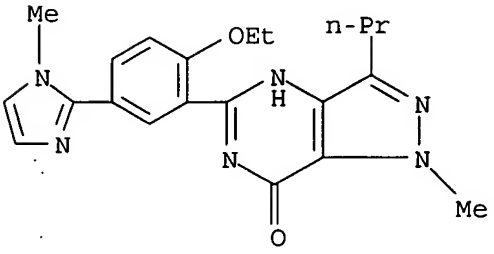


RN 147676-79-7 HCAPLUS
CN Piperazine, 1-[3-(4,7-dihydro-1-methyl-7-oxo-3-propyl-1H-pyrazolo[4,3-d]pyrimidin-5-yl)-4-ethoxybenzoyl]-4-methyl- (9CI) (CA INDEX NAME)

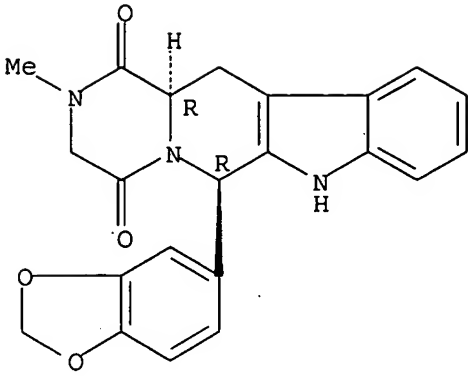


RN 147676-81-1 HCAPLUS
CN 7H-Pyrazolo[4,3-d]pyrimidin-7-one, 5-[2-ethoxy-5-(1-methyl-1H-imidazol-2-yl)phenyl]-1,4-dihydro-1-methyl-3-propyl- (9CI) (CA INDEX NAME)



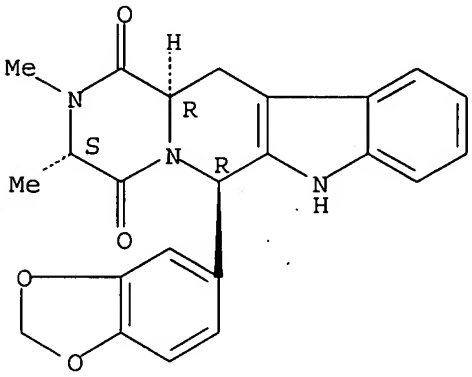
RN 171596-29-5 HCAPLUS
CN Pyrazino[1',2':1,6]pyrido[3,4-b]indole-1,4-dione, 6-(1,3-benzodioxol-5-yl)-2,3,6,7,12,12a-hexahydro-2-methyl-, (6R,12aR)- (9CI) (CA INDEX NAME)

Absolute stereochemistry. Rotation (+).

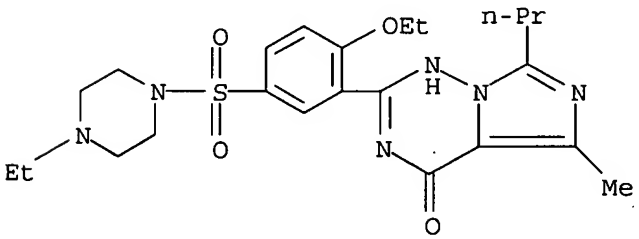


RN 171596-40-0 HCAPLUS
CN Pyrazino[1',2':1,6]pyrido[3,4-b]indole-1,4-dione, 6-(1,3-benzodioxol-5-yl)-2,3,6,7,12,12a-hexahydro-2,3-dimethyl-, (3S,6R,12aR)- (9CI) (CA INDEX NAME)

Absolute stereochemistry. Rotation (+).



RN 224785-90-4 HCAPLUS
CN Piperazine, 1-[[3-(1,4-dihydro-5-methyl-4-oxo-7-propylimidazo[5,1-f][1,2,4]triazin-2-yl)-4-ethoxyphenyl]sulfonyl]-4-ethyl- (9CI) (CA INDEX NAME)



IT **9068-52-4P**, Phosphodiesterase V
RL: BPN (Biosynthetic preparation); BPR (Biological process); BSU (Biological study, unclassified); PUR (Purification or recovery); BIOL (Biological study); PREP (Preparation); PROC (Process)
(phosphodiesterase 5 inhibitor for daily treatment for sexual

dysfunction)
RN 9068-52-4 HCAPLUS
CN Phosphodiesterase, guanosine cyclic 3',5'-phosphate (9CI) (CA INDEX NAME)

*** STRUCTURE DIAGRAM IS NOT AVAILABLE ***

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=> d his ful

     FILE 'HCAPLUS' ENTERED AT 16:18:57 ON 13 JUL 2005
                  E PULLMAN WILLIAM ERNEST/AU
L40             3 SEA ABB=ON  ("PULLMAN WILLIAM"/AU OR "PULLMAN WILLIAM E"/AU OR
                  "PULLMAN WILLIAM ERNEST"/AU)
                  E WHITAKER JOHN STEVEN/AU
L41             2 SEA ABB=ON  "WHITAKER JOHN S"/AU
L42             0 SEA ABB=ON  L40 AND L41
L43             2 SEA ABB=ON  L41 OR L42
                  D TI 1-2
                  SELECT RN L43 1-2

     FILE 'REGISTRY' ENTERED AT 16:23:15 ON 13 JUL 2005
L44            14 SEA ABB=ON  (139755-81-0/BI OR 139755-83-2/BI OR 139755-85-4/BI
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                  147676-79-7/BI OR 147676-81-1/BI OR 171596-29-5/BI OR 171596-40
                  -0/BI OR 224785-90-4/BI OR 9040-59-9/BI OR 9068-52-4/BI OR
                  139755-84-3/BI)

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L45             2 SEA ABB=ON  L43 AND L44
L46               ANALYZE L45 1-2 CT :       4 TERMS

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L52            22 SEA ABB=ON  L50 OR L51

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L61            32 SEA ABB=ON  L60 AND 20(W) MG

     FILE 'MEDLINE, BIOSIS, EMBASE, JAPIO, JICST-EPLUS' ENTERED AT 16:46:16 ON
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L62            33 SEA ABB=ON  L55
L63            32 DUP REMOV L62 (1 DUPLICATE REMOVED)
L64            32 SEA ABB=ON  L61 OR L63   32 cits from above db's

     FILE REGISTRY
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Property values tagged with IC are from the ZIC/VINITI data file provided by InfoChem.

STRUCTURE FILE UPDATES: 12 JUL 2005 HIGHEST RN 854811-13-5
DICTIONARY FILE UPDATES: 12 JUL 2005 HIGHEST RN 854811-13-5

FILE HCAPLUS

FILE COVERS 1907 - 13 Jul 2005 VOL 143 ISS 3
FILE LAST UPDATED: 12 Jul 2005 (20050712/ED)

New CAS Information Use Policies, enter HELP USAGETERMS for details.

FILE MEDLINE
FILE LAST UPDATED: 12 JUL 2005 (20050712/UP). FILE COVERS 1950 TO DATE.

On December 19, 2004, the 2005 MeSH terms were loaded.

FILE USPATFULL
FILE COVERS 1971 TO PATENT PUBLICATION DATE: 12 Jul 2005 (20050712/PD)
FILE LAST UPDATED: 12 Jul 2005 (20050712/ED)
HIGHEST GRANTED PATENT NUMBER: US6918136
HIGHEST APPLICATION PUBLICATION NUMBER: US2005150027
CA INDEXING IS CURRENT THROUGH 12 Jul 2005 (20050712/UPCA)
ISSUE CLASS FIELDS (/INCL) CURRENT THROUGH: 12 Jul 2005 (20050712/PD)
REVISED CLASS FIELDS (/NCL) LAST RELOADED: Jun 2005
USPTO MANUAL OF CLASSIFICATIONS THESAURUS ISSUE DATE: Jun 2005

FILE BIOSIS
FILE COVERS 1969 TO DATE.
CAS REGISTRY NUMBERS AND CHEMICAL NAMES (CNs) PRESENT
FROM JANUARY 1969 TO DATE.

RECORDS LAST ADDED: 8 July 2005 (20050708/ED)

FILE RELOADED: 19 October 2003.

FILE EMBASE
FILE COVERS 1974 TO 7 Jul 2005 (20050707/ED)

EMBASE has been reloaded. Enter HELP RLOAD for details.

FILE JAPIO
FILE LAST UPDATED: 4 JUL 2005 <20050704/UP>
FILE COVERS APR 1973 TO MARCH 31, 2005

FILE JICST-EPLUS
FILE COVERS 1985 TO 11 JUL 2005 (20050711/ED)

THE JICST-EPLUS FILE HAS BEEN RELOADED TO REFLECT THE 1999 CONTROLLED TERM (/CT) THESAURUS RELOAD.

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L48         177 SEA FILE=HCAPLUS ABB=ON  L47
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L55  ANSWER 1 OF 22  HCAPLUS  COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER:        2005:177879  HCAPLUS
DOCUMENT NUMBER:         142:274066
TITLE:                   Use of a nitric oxide synthase (NOS) cofactor for the
                         treatment of sexual dysfunction
INVENTOR(S):             Bloch, Wilhelm; Sommer, Frank; Klotz, Theo
PATENT ASSIGNEE(S):      Cell Center Cologne GmbH, Germany
SOURCE:                  PCT Int. Appl., 40 pp.
                         CODEN: PIXXD2
DOCUMENT TYPE:           Patent
LANGUAGE:                English
FAMILY ACC. NUM. COUNT:  1
PATENT INFORMATION:

     PATENT NO.           KIND   DATE        APPLICATION NO.         DATE
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     WO 2005018620         A2    20050303    WO 2004-EP9543          20040826 <--
         W:  AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH,
             CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD,
             GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC,
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             NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY,
             TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW
         RW: BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM,
             AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK,
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             SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE,
             SN, TD, TG
PRIORITY APPLN. INFO.:                       EP 2003-19309       A  20030826 <--
OTHER SOURCE(S):         MARPAT 142:274066
AB   Compns. and methods are provided for the treatment of sexual
     dysfunction in a mammal, including male sexual
     dysfunction, e.g. erectile dysfunction, and female sexual
     dysfunction. In particular, the use of a NOS cofactor in the
     preparation of a medicament for the treatment and/or prevention of
     sexual dysfunction is described. The cofactor may be
     tetrahydrobiopterin or an analog or precursor thereof,.

L55  ANSWER 2 OF 22  HCAPLUS  COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER:        2005:136521  HCAPLUS
DOCUMENT NUMBER:         142:225784
TITLE:                   Nanoparticulate sildenafil free base compositions
INVENTOR(S):             Ryde, Tuula A.; Hovey, Douglas C.; Bosch, H. William
PATENT ASSIGNEE(S):      Elan Pharma International Ltd., Ire.
SOURCE:                  PCT Int. Appl., 76 pp.
```

CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2005013937	A2	20050217	WO 2004-US19106	20040723 <--
WO 2005013937	A3	20050616		

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW
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US 2005042177	A1	20050224	US 2004-895405	20040721 <--
PRIORITY APPLN. INFO.:			US 2003-489101P P	20030723 <--

AB The present invention is directed to nanoparticulate compns. comprising sildenafil free base. The sildenafil free base particles have an effective average particle size of <2000 nm. Thus, 30 g the nanoparticulate sildenafil free base dispersion was added to 3.0 g mannitol and 1.5 g pullulan. A wafer tray was then filled by adding 0.5 g the diluted sildenafil free base dispersion to each 0.5-mL well and the wafer tray was then placed in a lyophilizer for 48 h to produce the final lyophilized wafer dosage form.

L55 ANSWER 3 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2005:76270 HCAPLUS
DOCUMENT NUMBER: 142:148827
TITLE: Phosphodiesterase 5 inhibitor-5-HT1a agonist combination for the treatment of **sexual dysfunction**
INVENTOR(S): Naylor, Alasdair Mark; Van der Graaf, Pieter Hadewijn; Wayman, Christopher Peter
PATENT ASSIGNEE(S): Pfizer Limited, UK; Pfizer Inc.
SOURCE: PCT Int. Appl., 62 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2005007166	A1	20050127	WO 2004-IB2286	20040712 <--

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EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG

US 2005065158	A1	20050324	US 2004-883622		20040701 <--
PRIORITY APPLN. INFO.:			GB 2003-16673	A	20030716 <--
			GB 2003-18095	A	20030801 <--
			GB 2003-21308	A	20030911 <--
			US 2003-512030P	P	20031017
			US 2003-513125P	P	20031021

AB The invention discloses the use of cyclic guanosine 3', 5'-monophosphate phosphodiesterase type 5 (**PDE5**) inhibitors in combination with 5-HT1a agonists for the treatment of **sexual dysfunction**, particularly female sexual arousal disorder (FSAD) with concomitant hypoactive sexual desire disorder (HSDD).

REFERENCE COUNT: 7 THERE ARE 7 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L55 ANSWER 4 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:759835 HCAPLUS
DOCUMENT NUMBER: 141:277616
TITLE: Preparation of 3-(1-[3-(1,3-benzothiazol-6-yl)propylcarbamoyl]cycloalkyl)propanoic acid derivatives as nep inhibitors
INVENTOR(S): Hepworth, David
PATENT ASSIGNEE(S): Pfizer Inc., UK
SOURCE: U.S. Pat. Appl. Publ., 27 pp., which
CODEN: USXXCO
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.		DATE
US 2004180941	A1	20040916	US 2004-800065		20040312 <--
WO 2004080985	A1	20040923	WO 2004-IB822		20040309 <--

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NL 1025709	A1	20040916	NL 2004-1025709		20040312 <--
NL 1025709	C2	20050314			
PRIORITY APPLN. INFO.:			GB 2003-5916	A	20030314 <--
			US 2003-464608P	P	20030422 <--
			GB 2003-29143	A	20031216
			US 2004-538079P	P	20040120

OTHER SOURCE(S): MARPAT 141:277616
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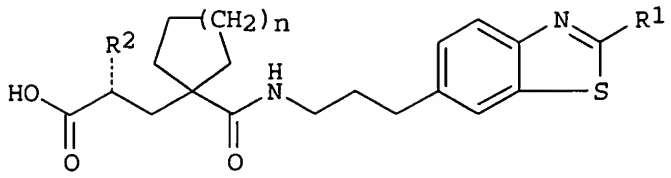

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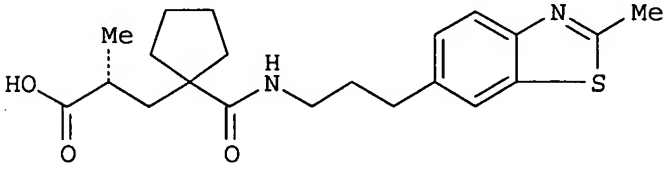

II

AB The invention relates to the use of title compds. I [R1 = H or Me; R2 = Me or Et; n = 1 or 2] as inhibitors of neutral endopeptidase enzyme (NEP), processes for the preparation thereof, intermediates used in the preparation thereof and compns. containing said inhibitors. Thus, e.g., II was prepared by amidation of 1-[(2R)-3-tert-butoxy-2-methyl-3-oxopropyl]cyclopentane carboxylic acid with 3-(2-methyl-1,3-benzothiazol-6-yl)propylamine dihydrochloride (preparation given) with subsequent hydrolysis to provide the free acid. I have been demonstrated to possess IC50 values of <20 nanomolar in tests for NEP inhibition and demonstrate a selectivity over soluble secreted endopeptidase (SEP) of at least 1000 fold. These inhibitors have utility in a variety of therapeutic areas including the treatment of male and female **sexual dysfunction**, particularly female **sexual dysfunction** (FSD), especially wherein the FSD is female sexual arousal disorder (FSAD).

L55 ANSWER 5 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2004:546487 HCAPLUS
DOCUMENT NUMBER: 141:106453
TITLE: Preparation of cyclopentyl glutaramide derivs. as neutral endopeptidase inhibitors
INVENTOR(S): Dack, Kevin Neil; Owen, Dafydd Rhys; Watson, Christine Anne Louise
PATENT ASSIGNEE(S): Pfizer Limited, UK; Pfizer Inc.
SOURCE: PCT Int. Appl., 109 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2004056787	A1	20040708	WO 2003-IB5981	20031212 <--

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW
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US 2004138274	A1	20040715	US 2003-739426	20031218 <--
NL 1025116	A1	20040624	NL 2003-1025116	20031223 <--
NL 1025116	C2	20041018		

PRIORITY APPLN. INFO.: GB 2002-30025 A 20021223 <--
US 2003-448224P P 20030218 <--

OTHER SOURCE(S): MARPAT 141:106453

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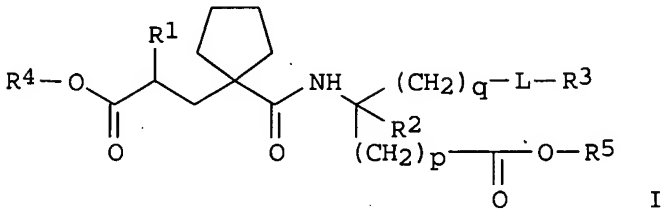

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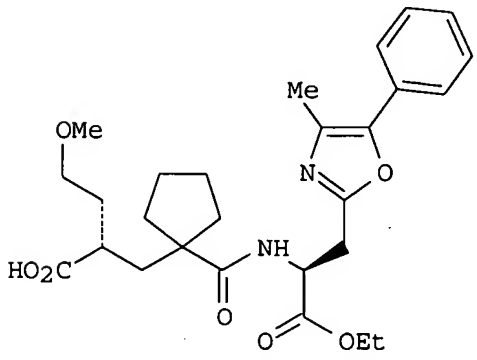


II

AB The title compds. I [R1 = C1-C6alkyl, C1-C6alkoxyC1-C3alkyl, or C1-C6alkoxyC1-C6alkoxyC1-C3alkyl; R2 = H or C1-C6alkyl; L = an aromatic heterocyclic ring, optionally substituted with C1-C6alkyl or halo; R3 = C1-C6alkyl optionally substituted by halo, alkoxy, haloalkoxy, alkylthio, haloalkylthio or nitrile group, or R3 is Ph or aromatic heterocyclyl each of which may be independently substituted by one or more alkyl, halo, haloalkyl, alkoxy, haloalkoxy, alkylthio, haloalkylthio or nitrile group; R4, R5 = either both hydrogen, or one of R4 and R5 is hydrogen and the other is a biolabile ester; p = 0-2; and q = 1 or 2] were prepared as neutral endopeptidase inhibitors for the treatment of cardiovascular disorders or related diseases. For example, reaction of (2S)-2-Amino-3-[5-(4-chlorophenyl)-oxazol-2-yl]-propionic acid Et ester hydrochloride (preparation given) and 1-[(2S)-2-(tert-butoxycarbonyl)-4-methoxybutyl]cyclopentanecarboxylic acid yielded (2S)-2-{1-[(1S)-1-Ethoxycarbonyl-2-(4-methyl-5-phenyl-oxazol-2-yl)-ethylcarbamoyl]-cyclopentylmethyl}-4-methoxy-butyric acid tert Bu ester, which when treated with trifluoroacetic acid furnished compound II. The prepared compds. are potent inhibitors of neutral endopeptidase.

REFERENCE COUNT: 2 THERE ARE 2 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L55 ANSWER 6 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:120699 HCAPLUS
DOCUMENT NUMBER: 140:169665
TITLE: New **sexual-dysfunction** -compound-containing rapid-onset pharmaceutical formulations comprising cocoa powder and use thereof
INVENTOR(S): Lindberg, Nils-olof; Lindell, Katarina; Thyresson, Kristina; Martino, Alice C.
PATENT ASSIGNEE(S): Pharmacia Ab, Swed.
SOURCE: PCT Int. Appl., 28 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.		DATE	
WO 2004012702	A1	20040212	WO 2003-SE1022		20030618	<--
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, OM, PH, PL, PT, RO, RU, SD, SE, SG, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZM, ZW						
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG						
CA 2495527	AA	20040212	CA 2003-2495527		20030618	<--
EP 1539096	A1	20050615	EP 2003-733755		20030618	<--
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ, EE, HU, SK						
US 2004126448	A1	20040701	US 2003-634159		20030805	<--
PRIORITY APPLN. INFO.:			SE 2002-2365	A	20020805	<--
			US 2003-438946P	P	20030109	<--
			WO 2003-SE1022	W	20030618	<--

OTHER SOURCE(S): MARPAT 140:169665
AB A **sexual-dysfunction**-compound-containing a rapid-onset pharmaceutical composition that comprises cocoa powder, process for manufacturing the composition and use of the composition in **sexual dysfunction** therapy.

L55 ANSWER 7 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2004:60144 HCAPLUS
DOCUMENT NUMBER: 140:117359
TITLE: Treatment of female **sexual dysfunction** with phosphodiesterase inhibitors
INVENTOR(S): Place, Virgil A.; Wilson, Leland F.; Doherty, Paul C.; Hanamoto, Mark S.; Spivack, Alfred P.; Gesundheit, Neil; Bennett, Sean R.; Doherty, Jane
PATENT ASSIGNEE(S): USA
SOURCE: U.S. Pat. Appl. Publ., 15 pp., Cont.-in-part of U.S. Ser. No. 499,959.
CODEN: USXXCO
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 7
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 2004014761	A1	20040122	US 2002-279039	20021022 <--
US 5877216	A	19990302	US 1997-959064	19971028 <--
US 6469016	B1	20021022	US 2000-499959	20000208 <--
WO 2004037262	A2	20040506	WO 2003-US33642	20031022 <--
WO 2004037262	A3	20040812		

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, UZ, VC, VN, YU, ZA, ZM, ZW

RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG

PRIORITY APPLN. INFO.:	US 1997-959057	B2	19971028 <--
	US 1997-959064	A2	19971028 <--
	US 1998-181316	B3	19981027 <--
	US 2000-499959	A2	20000208 <--
	US 2002-279039	A	20021022 <--

AB A topical pharmaceutical composition is provided for the treatment of female **sexual dysfunction**, wherein the composition is formulated so as to contain a therapeutically effective amount of a phosphodiesterase inhibitor and a pharmaceutically acceptable carrier for topical administration. The phosphodiesterase inhibitor is generally selected from Type III, Type IV, Type V, and nonspecific phosphodiesterase inhibitors. Examples of cream and suppository formulations of sildenafil, tadalafil and TA-1790 are given.

L55 ANSWER 8 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER:	2003:818141 HCAPLUS
DOCUMENT NUMBER:	139:312448
TITLE:	Methods of treating medication-, substance-, disease-, and other medical condition-related **sexual dysfunction**
INVENTOR(S):	Shapira, Nathan Andrew
PATENT ASSIGNEE(S):	University of Florida, USA
SOURCE:	U.S. Pat. Appl. Publ., 12 pp. CODEN: USXXCO
DOCUMENT TYPE:	Patent
LANGUAGE:	English
FAMILY ACC. NUM. COUNT:	1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 2003195186	A1	20031016	US 2003-411644	20030410 <--
WO 2003086372	A2	20031023	WO 2003-US10994	20030410 <--
WO 2003086372	A3	20040325		

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NI, NO, NZ, OM, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW

RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY,

KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG
PRIORITY APPLN. INFO.: US 2002-371666P P 20020410 <--
AB Many males and females experience **sexual dysfunction** either caused or made worse by medications, other substances, diseases, and other medical conditions. Currently, there is need for addnl. treatment alternatives for these patients' **sexual dysfunction.** The subject invention provides a novel treatment for these individuals with **sexual dysfunction** by inhibiting the enzyme that breaks down acetylcholine (a compound that helps modulate normal sexual function) and elevates acetylcholine levels in the body. The acetylcholinesterase inhibitor is selected from the group consisting of donepezil, galantamine, tacrine, eptastigmine, physostigmine, rivastigmine, metrifonate, neostigmine, huperzine A, and combinations thereof.

L55 ANSWER 9 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2003:409897 HCAPLUS
DOCUMENT NUMBER: 139:127241
TITLE: Tadalafil, a further innovation in the treatment of **sexual dysfunction**
AUTHOR(S): Pomerol, Jose Maria; Rabasseda, Xavier
CORPORATE SOURCE: Fundacio Puigvert, Barcelona, Spain
SOURCE: Drugs of Today (**2003**), 39(2), 103-113
CODEN: MDACAP; ISSN: 0025-7656
PUBLISHER: Prous Science
DOCUMENT TYPE: Journal; General Review
LANGUAGE: English
AB A review. In recognition of the large number of sufferers of **sexual dysfunction** worldwide, and the variety of etiologies of the condition, investigation into effective pharmacol. agents has been expanded. One method of intervention is inhibition of phosphodiesterase type 5 (**PDE5**), an action which has already been exploited with a considerable degree -- though not complete -- of success. A number of new agents that inhibit **PDE5** are under development. Notable among these is tadalafil, which has demonstrated a high level of selectivity for **PDE5** over the other phosphodiesterases and has shown efficacy in improving erectile function and sexual satisfaction in phase III trials. Throughout the clin. development program for tadalafil, the drug has been well tolerated and without serious side effects. The manufacturer, Lilly ICOS, received a letter of approval from the US Food and Drug Administration on Apr. 30, 2002, for use of the drug as a treatment for erectile dysfunction. Lilly ICOS hopes to market tadalafil, with the trade name Cialis, in the USA in 2003.
REFERENCE COUNT: 41 THERE ARE 41 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L55 ANSWER 10 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2003:396889 HCAPLUS
DOCUMENT NUMBER: 138:401744
TITLE: Preparation of polycyclic guanine derivative phosphodiesterase V inhibitors
INVENTOR(S): Asberom, Theodros; Clader, John W.; Hu, Yueqing; Pissarnitski, Dmitri A.; Stamford, Andrew W.; Xu, Ruo
PATENT ASSIGNEE(S): Schering Corporation, USA
SOURCE: PCT Int. Appl., 95 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent

LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2003042216	A1	20030522	WO 2002-US35721	20021107 <--
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, HR, HU, ID, IL, IN, IS, JP, KG, KR, KZ, LC, LK, LR, LT, LU, LV, MA, MD, MG, MK, MN, MX, MZ, NO, NZ, PH, PL, PT, RO, RU, SC, SE, SG, SI, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UZ, VC, VN, YU, ZA, ZM				
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG				
CA 2465893	AA	20030522	CA 2002-2465893	20021107 <--
US 2003176413	A1	20030918	US 2002-290011	20021107 <--
EP 1442042	A1	20040804	EP 2002-786685	20021107 <--
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ, EE, SK				
JP 2005509038	T2	20050407	JP 2003-544052	20021107 <--
PRIORITY APPLN. INFO.:			US 2001-344498P P	20011109 <--
			WO 2002-US35721 W	20021107 <--

OTHER SOURCE(S): MARPAT 138:401744
GI

* STRUCTURE DIAGRAM TOO LARGE FOR DISPLAY - AVAILABLE VIA OFFLINE PRINT *

AB Title compds. I [q = 0-2; R1, R3-6 = H, alkyl, aryl, heteroaryl, cycloalkyl, heterocycloalkyl; R2 = H, halo, alkyl, alkoxy, etc.; Y = alkyl, aryl] are prepared For instance, 4-amino-1-benzyl-5-(ethoxycarbonyl)imidazole (preparation given) is treated with ethylisocyanate (o-xylene, reflux, 16 h), the resulting product cyclized (MeOH, NaOMe, reflux, 4 h), subsequently treated with POCl3 and the product used to alkylate (R)-2-amino-3-phenylpropanol (NMP, 130°, 12 h) which provides II. II is treated with MsCl (Et3N), debenzylated (MeOH, NH4O2CH, Pd(OH)2/C, reflux, 3 h), brominated (HOAc, NaOAc, Br2), alkylated with 3-chloro-4-methoxybenzyl bromide (DMF, K2CO3) and treated with NaOEt (DMF/EtOH) to afford III. III has IC50 < 4.1 nM for PDE V and IC50 > 300 nM for PDE VI. I are useful for treating **sexual dysfunction.**

REFERENCE COUNT: 5 THERE ARE 5 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L55 ANSWER 11 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2002:51273 HCAPLUS
DOCUMENT NUMBER: 136:96099
TITLE: Treatment of male **sexual dysfunction**
INVENTOR(S): Naylor, Alasdair Mark; Van der Graaf, Pieter Hadewijn; Wayman, Christopher Peter
PATENT ASSIGNEE(S): Pfizer Limited, UK; Pfizer Inc.
SOURCE: PCT Int. Appl., 124 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English

FAMILY ACC. NUM. COUNT: 10
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2002003995	A2	20020117	WO 2001-IB1187	20010702 <--
WO 2002003995	A3	20020418		
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG				
US 2002052370	A1	20020502	US 2001-893585	20010628 <--
CA 2414112	AA	20020117	CA 2001-2414112	20010702 <--
AU 2001069353	A5	20020121	AU 2001-69353	20010702 <--
EP 1296687	A2	20030402	EP 2001-947709	20010702 <--
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR				
JP 2004502735	T2	20040129	JP 2002-508449	20010702 <--
NZ 522931	A	20050324	NZ 2001-522931	20010702 <--
ZA 2003000121	A	20040121	ZA 2003-121	20030106 <--
ZA 2003000120	A	20040126	ZA 2003-120	20030106 <--
ZA 2003004460	A	20040624	ZA 2003-4460	20030609 <--
PRIORITY APPLN. INFO.:			GB 2000-16684 A	20000706 <--
			GB 2000-30647 A	20001215 <--
			GB 2001-6167 A	20010313 <--
			GB 2001-8483 A	20010404 <--
			US 2000-219100P P	20000718 <--
			GB 2001-1584 A	20010122 <--
			US 2001-274957P P	20010312 <--
			WO 2001-IB1187 W	20010702 <--

OTHER SOURCE(S): MARPAT 136:96099

AB The present invention relates to the use of neutral endopeptidase inhibitors (NEPi) and a combination of NEPi and phosphodiesterase type (**PDE5**) inhibitor for the treatment of male **sexual dysfunction**, in particular MED.

L55 ANSWER 12 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2001:924320 HCAPLUS
DOCUMENT NUMBER: 136:31728
TITLE: Daily treatment for erectile dysfunction using a phosphodiesterase 5 (**PDE5**) inhibitor
INVENTOR(S): Whitaker, John S.; Saenz de Tejada, Inigo; Ferguson, Kenneth M.
PATENT ASSIGNEE(S): USA
SOURCE: U.S. Pat. Appl. Publ., 12 pp., Cont.-in-part of U.S. Ser. No. 558,911.
CODEN: USXXCO
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 3
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE

US 2001053780	A1	20011220	US 2001-834442	20010413 <--
CA 2371684	AA	20001109	CA 2000-2371684	20000426 <--
EP 1173181	A2	20020123	EP 2000-926367	20000426 <--
EP 1173181	B1	20031015		
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO				
US 6451807	B1	20020917	US 2000-558911	20000426 <--
JP 2002543116	T2	20021217	JP 2000-614984	20000426 <--
BR 2000010181	A	20030225	BR 2000-10181	20000426 <--
NZ 514882	A	20030829	NZ 2000-514882	20000426 <--
AT 251908	E	20031115	AT 2000-926367	20000426 <--
AU 769946	B2	20040212	AU 2000-44908	20000426 <--
EP 1415652	A2	20040506	EP 2003-23276	20000426 <--
EP 1415652	A3	20040512		
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL				
HR 2001000778	A1	20021231	HR 2001-778	20011023 <--
NO 2001005275	A	20011206	NO 2001-5275	20011029 <--
HK 1041204	A1	20040305	HK 2002-101474	20020226 <--
US 2003100478	A1	20030529	US 2002-198903	20020719 <--
US 2003144296	A1	20030731	US 2003-341664	20030114 <--
US 2004058929	A1	20040325	US 2003-661951	20030912 <--
PRIORITY APPLN. INFO.:			US 1999-132036P	P 19990430 <--
			US 2000-558911	A2 20000426 <--
			EP 2000-926367	A3 20000426 <--
			WO 2000-US11129	W 20000426 <--
			US 2001-834442	A3 20010413 <--
			US 2001-31556	A1 20011019 <--

AB The invention provides phosphodiesterase (PDE) enzyme inhibitors and to their use in pharmaceutical articles of manufacture In particular, the invention provides potent inhibitors of cyclic guanosine 3',5'-monophosphate specific phosphodiesterase type 5 (**PDE5**) that, when incorporated into a pharmaceutical product at about 1-10 mg unit dosage, are useful for the treatment of **sexual dysfunction** by daily administration of the **PDE5** inhibitor. The articles of manufacture described are characterized by **PDE5** inhibition, and accordingly, provide a benefit in therapeutic areas where inhibition of **PDE5** is desired, especially erectile dysfunction, with minimization or elimination of adverse side effects resulting from inhibition of other phosphodiesterase enzymes and with an improvement of vascular conditioning.

L55 ANSWER 13 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2001:916407 HCAPLUS
DOCUMENT NUMBER: 136:53755
TITLE: Synthesis of nitrosated and nitrosylated (hetero)cyclic phosphodiesterase inhibitors used in treatment of **sexual dysfunction**
INVENTOR(S): Garvey, David S.; Saenz de Tejada, Inigo; Earl, Richard A.; Khanapure, Subhash P.
PATENT ASSIGNEE(S): Nitromed, Inc., USA
SOURCE: U.S., 117 pp., Cont.-in-part of U.S. 5,958,926. CODEN: USXXAM
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 3
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE

US 6331543	B1	20011218	US 1999-387727	19990901 <--
US 5874437	A	19990223	US 1996-740764	19961101 <--
WO 9819672	A1	19980514	WO 1997-US19870	19971031 <--
W: AU, CA, JP, US				
RW: AT, BE, CH, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE				
US 5958926	A	19990928	US 1998-145142	19980901 <--
US 2002019405	A1	20020214	US 2001-941691	20010830 <--
US 6462044	B2	20021008		
US 2003023087	A1	20030130	US 2002-216886	20020813 <--
US 2004087591	A1	20040506	US 2003-694183	20031028 <--
PRIORITY APPLN. INFO.:			US 1996-740764	A2 19961101 <--
			WO 1997-US19870	A2 19971031 <--
			US 1998-145142	A2 19980901 <--
			US 1999-387727	A1 19990901 <--
			US 2001-941691	A3 20010830 <--
			US 2002-216866	A3 20020813 <--

OTHER SOURCE(S): MARPAT 136:53755
GI

* STRUCTURE DIAGRAM TOO LARGE FOR DISPLAY - AVAILABLE VIA OFFLINE PRINT *

AB Compds. I-V, derivs. thereof, and certain substituted Ph and phthalzaine derivs. were claimed [D2 = H, alkyl, D; D = NO, NO2, alkyl, acyl, phosphoryl, silyl, etc.; A1-3 comprise the other subunits of a 5- or 6-membered monocyclic aromatic ring; R8 = H, (halo)alkyl; p = 1-10; R24 = H, cyclohexyl, piperidinyl, etc., with the proviso that at least one of A1-3, J, or R24 contains T-Q or D; T = bond, O, S(O), amino; Q = NO, NO2; D1 = D or H; R37 = (hetero)aryl; R38 = H, halo, alkyl; G1 = alkyl, alkenyl or is part of a ring fused to the piperidine moiety of III; G4 = O, S; R40 = H, alkyl, haloalkyl, halo, etc.; R41 = alkyl, hydroxyalkyl, alkylcarboxy, etc.; R42 = aryl, alkylaryl, alkyloxyaryl; T1 = alkyl, oxyalkyl, thioalkyl, aminoalkyl]. Two synthetic examples were provided. E.g., the S-nitroso derivative of the 3-mercapto-3-methylbutyric acid ester of dipyridamole (VI) was prepared in 4 steps from dipyridamole in 3.5% overall yield. VI at doses of 10 and 30 μM was more efficacious in relaxing phenylephrine-induced tissue contraction than was the known phosphodiesterase inhibitor, dipyridamole. The present invention describes novel (nitrosated/nitrosylated) phosphodiesterase inhibitors, and compns. containing at least one (nitrosated/nitrosylated) phosphodiesterase inhibitor, and, optionally, one or more compds. that donate, transfer or release NO, elevate endogenous levels of endothelium-derived relaxing factor, stimulate endogenous synthesis of NO, or is a substrate for nitric oxide synthase and/or one or more vasoactive agents. The present invention also provides methods for treating or preventing **sexual dysfunctions** in males and females, for enhancing sexual responses in males and females, and for treating or preventing diseases induced by the increased metabolism of cGMP, such as hypertension, pulmonary hypertension, etc.

REFERENCE COUNT: 86 THERE ARE 86 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L55 ANSWER 14 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2001:798055 HCAPLUS
DOCUMENT NUMBER: 135:339295
TITLE: Daily treatment for erectile dysfunction using a

phosphodiesterase 5 (**PDE5**) inhibitor
INVENTOR(S): Whitaker, John S.; Saenz de Tejada, Inigo; Ferguson, Kenneth M.
PATENT ASSIGNEE(S): Lilly Icos LLC, USA
SOURCE: PCT Int. Appl., 48 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 3
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001080860	A2	20011101	WO 2001-US12512	20010413 <--
WO 2001080860	A3	20020606		
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG				
US 6451807	B1	20020917	US 2000-558911	20000426 <--
CA 2407519	AA	20011101	CA 2001-2407519	20010413 <--
EP 1276481	A2	20030122	EP 2001-927133	20010413 <--
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR				
BR 2001010373	A	20030218	BR 2001-10373	20010413 <--
JP 2003531174	T2	20031021	JP 2001-577959	20010413 <--
NZ 521869	A	20041029	NZ 2001-521869	20010413 <--
NO 2002005138	A	20021216	NO 2002-5138	20021025 <--
ZA 2002008776	A	20030603	ZA 2002-8776	20021030 <--

PRIORITY APPLN. INFO.:			
US 2000-558911	A	20000426	<--
US 1999-132036P	P	19990430	<--
WO 2001-US12512	W	20010413	<--

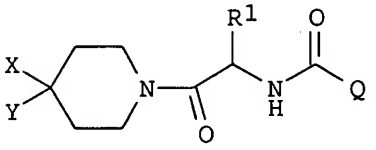
AB The invention relates to phosphodiesterase (PDE) enzyme inhibitors and to their use in pharmaceutical articles of manufacture In particular, the invention relates to potent inhibitors of cyclic guanosine 3',5'-monophosphate-specific phosphodiesterase type 5 (**PDE5**) that, when incorporated into a pharmaceutical product at about 1 to about 10 mg unit dosage, are useful for the treatment of **sexual dysfunction** by daily administration of the **PDE5** inhibitor. The articles of manufacture are characterized by **PDE5** inhibition, and accordingly provide a benefit in therapeutic areas where inhibition of **PDE5** is desired, especially erectile dysfunction, with minimization or elimination of adverse side effects resulting from inhibition of other phosphodiesterase enzymes and with an improvement of vascular conditioning.

L55 ANSWER 15 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2001:713326 HCAPLUS
DOCUMENT NUMBER: 135:272990
TITLE: Preparation of piperazinylcarbonylaminomethylcarbonylpiperidines as melanocortin-4 receptor agonists
INVENTOR(S): Palucki, Brenda L.; Barakat, Khaled J.; Guo, Liangqin; Lai, Yingjie; Nargund, Ravi P.; Park, Min K.; Pollard, Patrick G.; Sebhat, Iyassu K.; Ye, Zhixiong

PATENT ASSIGNEE(S): Merck & Co., Inc., USA
SOURCE: PCT Int. Appl., 220 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.		DATE	
WO 2001070708	A1	20010927	WO 2001-US8935		20010320	<--
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM						
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG						
CA 2403686	AA	20010927	CA 2001-2403686		20010320	<--
US 2002019523	A1	20020214	US 2001-812965		20010320	<--
US 6458790	B2	20021001				
EP 1268449	A1	20030102	EP 2001-922501		20010320	<--
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR						
JP 2003528088	T2	20030924	JP 2001-568918		20010320	<--
PRIORITY APPLN. INFO.:			US 2000-191442P	P	20000323	<--
			US 2000-242265P	P	20001020	<--
			WO 2001-US8935	W	20010320	<--

OTHER SOURCE(S): MARPAT 135:272990
GI



I

AB Title compds. [I; Q = (substituted) (fused) piperazinyl, morpholinyl, thiomorpholinyl; R1 = H, alkyl, (substituted) cycloalkyl(alkyl), aryl(alkyl), heteroaryl(alkyl), etc.; X = (substituted) alkyl, cycloalkyl(alkyl), aryl(alkyl), heteroaryl(alkyl), heterocyclyl(alkyl), cyano(alkyl), aminosulfonyl(alkyl), etc.; Y = H, alkyl, cycloalkyl(alkyl), (substituted) aryl(alkyl), heterocyclyl(alkyl), heteroaryl(alkyl)], were prepared as melanocortin-4 receptor (MC-4R) agonists. Thus, capsule formulations containing title compound (II) were prepared Representative I activated MC-4R with IC50<1 μM. I are claimed for the treatment of obesity, diabetes, and **sexual dysfunction** including erectile dysfunction and female **sexual dysfunction.**

REFERENCE COUNT: 1 THERE ARE 1 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L55 ANSWER 16 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2001:541505 HCAPLUS
DOCUMENT NUMBER: 135:132460

TITLE: Treatment of sexual function disorders with guanylate cyclase activators, optionally in combination with phosphodiesterase inhibitors
INVENTOR(S): Stief, Christian; Magerl, Hans-Jurgen; Kuthe, Andrea; Uckert, Stefan; Becker, Armin; Farssmann, Wolf Georg; Jones, Udo
PATENT ASSIGNEE(S): Germany
SOURCE: Ger. Offen., 6 pp.
CODEN: GWXXBX
DOCUMENT TYPE: Patent
LANGUAGE: German
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
DE 10002200	A1	20010726	DE 2000-10002200	20000119 <--
PRIORITY APPLN. INFO.:			DE 2000-10002200	20000119 <--

AB Medicaments containing activators of guanylate cyclase and their variants, individually or in combination with phosphodiesterase inhibitors, are provided for the treatment of sexual function disorders. e.g. erectile dysfunction.

L55 ANSWER 17 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2001:258390 HCAPLUS
DOCUMENT NUMBER: 135:189567
TITLE: IC-351: Treatment of erectile dysfunction treatment of female **sexual dysfunction** phosphodiesterase 5 inhibitor
AUTHOR(S): Sorbera, L. A.; Martin, L.; Leeson, P. A.; Castaner, J.
CORPORATE SOURCE: Prous Science, Barcelona, 08080, Spain
SOURCE: Drugs of the Future (**2001**), 26(1), 15-19
CODEN: DRFUD4; ISSN: 0377-8282
PUBLISHER: Prous Science
DOCUMENT TYPE: Journal; General Review
LANGUAGE: English
AB A review with 20 refs. Significantly more patients (86 %) given IC-351 reported enhanced erections as compared to placebo and a significant change in the patient's median rating was observed with IC-351 treatment as compared to placebo. IC-351 (ClalisTM) continues to undergo phase III trials as a treatment for **male erectile** dysfunction and phase II trials as a treatment for female **sexual dysfunction.**
REFERENCE COUNT: 20 THERE ARE 20 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L55 ANSWER 18 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2001:100982 HCAPLUS
DOCUMENT NUMBER: 134:152654
TITLE: β-Carboline pharmaceutical compositions
INVENTOR(S): Anderson, Neil R.; Gullapalli, Rampurna P.
PATENT ASSIGNEE(S): Lilly Icos Llc, USA
SOURCE: PCT Int. Appl., 31 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 2
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001008687	A1	20010208	WO 2000-US11136	20000426 <--
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				
RW: GH, GM, KE, LS, MW, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG				
AU 2000044912	A5	20010219	AU 2000-44912	20000426 <--
EP 1200091	A1	20020502	EP 2000-926371	20000426 <--
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL				
ZA 2002000823	A	20030204	ZA 2002-823	20020130 <--
US 6841167	B1	20050111	US 2002-31531	20020415 <--
PRIORITY APPLN. INFO.:			US 1999-146924P	P 19990803 <--
			WO 2000-US11136	W 20000426 <--

AB β-Carboline soft capsules contains a solution or suspension of a **PDE5** inhibitor, and are useful for treating **sexual dysfunction.** Thus, a formulation contained a β-carboline 25.0, Capmul MCM 177.5, Gelucire 44/14 177.5, and propylene glycol 20.0 mg/capsule. In the phys. study of the above capsule formulation, no sedimentation was observed after storage at 4° for 120 days.

REFERENCE COUNT: 4 THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L55 ANSWER 19 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2001:100981 HCAPLUS
DOCUMENT NUMBER: 134:152653
TITLE: β-Carboline pharmaceutical compositions containing cellulose
INVENTOR(S): Oren, Peter L.; Anderson, Neil R.; Kral, Martha A.
PATENT ASSIGNEE(S): Lilly Icos Llc, USA
SOURCE: PCT Int. Appl., 38 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 2
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001008686	A1	20010208	WO 2000-US11130	20000426 <--
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				
RW: GH, GM, KE, LS, MW, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG				
CA 2379948	AA	20010208	CA 2000-2379948	20000426 <--
BR 2000012863	A	20020416	BR 2000-12863	20000426 <--
EP 1200090	A1	20020502	EP 2000-926368	20000426 <--

R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL

JP 2003505509	T2	20030212	JP 2001-513416		20000426	<--
NZ 516616	A	20030725	NZ 2000-516616		20000426	<--
AU 776722	B2	20040916	AU 2000-44909		20000426	<--
AU 2000044909	A5	20010219				
ZA 2002000823	A	20030204	ZA 2002-823		20020130	<--
NO 2002000532	A	20020326	NO 2002-532		20020201	<--
PRIORITY APPLN. INFO.:			US 1999-146924P	P	19990803	<--
			WO 2000-US11130	W	20000426	<--

AB β-Carboline formulations contain a c-GMP phosphodiesterase inhibitor, a water-soluble diluent, a lubricant, a hydrophilic binder, a disintegrant, and optional microcryst. cellulose and/or a wetting agent, are useful for treating **sexual dysfunction.** Thus, a tablet formulation contained a β-carboline 5.00, lactose monohydrate 109.655, lactose monohydrate (spray dried) 17.50, Hydroxypropyl cellulose 4.025, croscarmellose sodium 6.30, SLS 0.49, microcryst. cellulose (granular-102) 26.25, croscarmellose sodium 4.90, and Mg stearate 0.88 mg/tablet.

REFERENCE COUNT: 3 THERE ARE 3 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L55 ANSWER 20 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2000:666601 HCAPLUS
DOCUMENT NUMBER: 133:256811
TITLE: Pharmaceutical compositions containing dopamine agonists in combination with nitric oxide donors for treating and/or preventing **sexual dysfunctions**
INVENTOR(S): Garvey, David S.
PATENT ASSIGNEE(S): Nitromed, Inc., USA
SOURCE: PCT Int. Appl., 48 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.		DATE	
WO 2000054773	A1	20000921	WO 2000-US3709		20000310	<--

W: AE, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM

RW: GH, GM, KE, LS, MW, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG

PRIORITY APPLN. INFO.:			US 1999-123920P	P	19990312 <--
OTHER SOURCE(S):			MARPAT 133:256811		

AB The present invention is directed to novel compns. comprising at least one dopamine agonist in combination with at least one nitric oxide donor (i.e. compds. that donate, transfer or release nitric oxide, elevate endogenous levels of endothelium-derived relaxing factor, stimulate endogenous synthesis of nitric oxide or are substrates for nitric oxide synthase). The novel compns. may optionally comprise at least one therapeutic agent, such as, a vasoactive agent, an antiemetic agent, and mixts. thereof. The

dopamine agonist is preferably apomorphine. The present invention is also directed to methods for treating and/or preventing **sexual dysfunctions** and/or enhancing sexual responses in patients. In other embodiments, the present invention is directed to methods treating or preventing neurodegenerative diseases, mitochondrial diseases, spinal cord injury, central or psychostimulant addiction, senile dementia, circulatory disorders, cardiovascular disorders, hyperprolactinemia or myopia. The compds. and/or compns. of the present invention can also be provided in the form of a pharmaceutical kit (no data).

REFERENCE COUNT: 4 THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L55 ANSWER 21 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 1999:753072 HCAPLUS
DOCUMENT NUMBER: 131:346565
TITLE: Combination of phentolamine and cyclic GMP phosphodiesterase inhibitors for the treatment of **sexual dysfunction**
INVENTOR(S): Estok, Thomas Mark
PATENT ASSIGNEE(S): Schering Corporation, USA
SOURCE: PCT Int. Appl., 104 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 9959584	A1	19991125	WO 1999-US7046	19990517 <--
W: AE, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CZ, DE, DK, EE, ES, FI, GB, GD, GE, HR, HU, ID, IL, IN, IS, JP, KG, KR, KZ, LC, LK, LR, LT, LU, LV, MD, MG, MK, MN, MX, NO, NZ, PL, PT, RO, RU, SE, SG, SI, SK, SL, TJ, TM, TR, TT, UA, US, UZ, VN, YU, ZA, AM, AZ, BY, KG, KZ, RU, TJ, TM				
RW: GH, GM, KE, LS, MW, SD, SL, SZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG				
AU 9940685	A1	19991206	AU 1999-40685	19990517 <--
PRIORITY APPLN. INFO.:			US 1998-81640 A	19980520 <--
			US 1998-82977 A2	19980521 <--
			US 1998-106517 A	19980629 <--
			WO 1999-US7046 W	19990517 <--

AB A method of treating **sexual dysfunction** comprising administering a therapeutically effective amount of a combination of phentolamine and cGMP PDE inhibitor (e.g. sildenafil), as well as pharmaceutical compns. and kits useful in those methods, are disclosed.

REFERENCE COUNT: 9 THERE ARE 9 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L55 ANSWER 22 OF 22 HCAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 1999:393867 HCAPLUS
DOCUMENT NUMBER: 131:193591
TITLE: IC-351 ICOS Corp
AUTHOR(S): Norman, Peter
CORPORATE SOURCE: Norman Consulting, Bucks, SL1 8JW, UK
SOURCE: Current Opinion in Central & Peripheral Nervous System Investigational Drugs (**1999**), 1(2), 268-271
CODEN: COCDFA; ISSN: 1464-844X

PUBLISHER: Current Drugs Ltd.
DOCUMENT TYPE: Journal; General Review
LANGUAGE: English

AB A review with 35 refs. IC-351 (GF-196960), an inhibitor of phosphodiesterase 5 (**PDE5**) from ICOS Corp, is in phase II trials for the treatment of mild to moderate erectile dysfunction (ED) [274568], [296831]. A randomized, placebo-controlled, crossover study assessed the safety and physiol. effects of IC-351 in patients with ED [274568]. Enrollment was completed in Apr. 1998 [284935]. Results from the trial showed that IC-351 demonstrated significant benefit over placebo [311566]. In Oct. 1998, ICOS entered into a joint venture agreement with Eli Lilly for the development and commercialization of IC-351 for the treatment of **sexual dysfunction** [300118], [310951]. IC-351 is also in development for the treatment of female **sexual dysfunction** [321995]. In Mar. 1998, the company announced that the compound was in preclin. evaluation for the treatment of hypertension [284638]. A collaboration with Glaxo Wellcome (GW) was terminated in Mar. 1997 [240438] and intellectual property rights were assigned to ICOS. This left ICOS to develop the compds. with royalties payable to GW. Although GW reserved the right to pursue its own program, it does not appear to be doing so. In Feb. 1999 Deutsche Bank predicted sales of $200 million in 2002 rising to $400 million in 2003 for IC-351 [316821].

REFERENCE COUNT: 35 THERE ARE 35 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

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=> d que stat l64
L47           1 SEA FILE=REGISTRY ABB=ON  171596-29-5/RN
L48         177 SEA FILE=HCAPLUS ABB=ON  L47
L49          24 SEA FILE=HCAPLUS ABB=ON  L48 AND ?SEXUAL?(W)?DYSFUNCT?
L50          22 SEA FILE=HCAPLUS ABB=ON  L49 AND (PRD<20030912 OR PD<20030912)
L51           1 SEA FILE=HCAPLUS ABB=ON  L50 AND (?FEMALE?(W)?AROUSAL? OR
                 ?MALE?(W)?ERECT?)
L52          22 SEA FILE=HCAPLUS ABB=ON  L50 OR L51
L53           1 SEA FILE=REGISTRY ABB=ON  PDE5/CN
L54          14 SEA FILE=HCAPLUS ABB=ON  L52 AND (L53 OR PDE5 OR PDE(W)5)
L55          22 SEA FILE=HCAPLUS ABB=ON  L52 OR L54
L56          74 SEA L55
L57          73 DUP REMOV L56 (1 DUPLICATE REMOVED)
L59          61 SEA L57 AND (ORAL? OR MOUTH? OR PO)
L60          40 SEA L59 AND ?MANUF?
L61          32 SEA L60 AND 20(W) MG
L62          33 SEA L55
L63          32 DUP REMOV L62 (1 DUPLICATE REMOVED)
L64          32 SEA L61 OR L63

=> d ibib abs l64 1-32

L64  ANSWER 1 OF 32  BIOSIS  COPYRIGHT (c) 2005 The Thomson Corporation  on STN
ACCESSION NUMBER:    2003:398067  BIOSIS
DOCUMENT NUMBER:     PREV200300398067
TITLE:               Third international conference on the management of
                     erectile dysfunction: Linking pathophysiology and
                     therapeutic response.
AUTHOR(S):           Nehra, Ajay [Reprint Author]; Steers, William D.; Althof,
                     Stanley E.; Andersson, Karl-Erik; Burnett, Arthur Louis II;
                     Costabile, Raymond A.; Goldstein, Irwin; Kloner, Robert A.;
                     Lue, Tom F.; Morales, Alvaro; Rosen, Raymond C.; Shabsigh,
                     Ridwan; Siroky, Mike B.; King, Laura
CORPORATE SOURCE:    Mayo Clinic, Rochester, MN, USA
SOURCE:              Journal of Urology, (August 2003) Vol. 170, No. 2
                     Part 2, pp. S3-S5. print.
                     Meeting Info.: Third Internationl Conference on the
                     Management of Erectile Dysfunction: Linking Pathophysiology
                     and Therapeutic Response. McLean, VA, USA. July 26-27,
                     2002.
                     CODEN: JOURAA. ISSN: 0022-5347.
DOCUMENT TYPE:       Article
                     Conference; (Meeting)
LANGUAGE:            English
ENTRY DATE:          Entered STN: 27 Aug 2003
                     Last Updated on STN: 27 Aug 2003

L64  ANSWER 2 OF 32  BIOSIS  COPYRIGHT (c) 2005 The Thomson Corporation  on STN
ACCESSION NUMBER:    2003:298657  BIOSIS
DOCUMENT NUMBER:     PREV200300298657
TITLE:               Tadalafil, a further innovation in the treatment of
                     sexual dysfunction.
AUTHOR(S):           Pomerol, Jose Maria; Rabasseda, Xavier [Reprint Author]
CORPORATE SOURCE:    Prous Science, S.A., 08080, P.O. Box 540, Barcelona, Spain
                     xrabasseda@prous.com
SOURCE:              Drugs of Today, (February 2003) Vol. 39, No. 2,
                     pp. 103-113. print.
                     ISSN: 0025-7656 (ISSN print).
DOCUMENT TYPE:       Article
```

General Review; (Literature Review)
LANGUAGE: English
ENTRY DATE: Entered STN: 25 Jun 2003
Last Updated on STN: 25 Jun 2003

L64 ANSWER 3 OF 32 BIOSIS COPYRIGHT (c) 2005 The Thomson Corporation on STN
ACCESSION NUMBER: 2001:215925 BIOSIS
DOCUMENT NUMBER: PREV200100215925
TITLE: IC-351: Treatment of erectile dysfunction, treatment of female **sexual dysfunction**, phosphodiesterase 5 inhibitor: GF-196960, CialisTM.
AUTHOR(S): Sorbera, L. A. [Reprint author]; Martin, L. [Reprint author]; Leeson, P. A. [Reprint author]; Castaner, J. [Reprint author]
CORPORATE SOURCE: Prous Science, 08080, Barcelona, Spain
SOURCE: Drugs of the Future, (**January, 2001**) Vol. 26, No. 1, pp. 15-19. print.
ISSN: 0377-8282.
DOCUMENT TYPE: Article
LANGUAGE: English
ENTRY DATE: Entered STN: 2 May 2001
Last Updated on STN: 18 Feb 2002

L64 ANSWER 4 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2004152442 EMBASE
TITLE: Evaluation and Treatment of Autonomic Disorders of the Urogenital System.
AUTHOR: Apostolidis A.N.; Fowler C.J.
CORPORATE SOURCE: A.N. Apostolidis, Department of Uro-Neurology, Natl. Hosp. for Neurol./Neurosurg., Queen Square, London WC1N 3BG, United Kingdom
SOURCE: Seminars in Neurology, (**2003**) Vol. 23, No. 4, pp. 443-452.
Refs: 110
ISSN: 0271-8235 CODEN: SEMNEP
COUNTRY: United States
DOCUMENT TYPE: Journal; Conference Article
FILE SEGMENT: 008 Neurology and Neurosurgery
028 Urology and Nephrology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20040429
Last Updated on STN: 20040429

AB Autonomic pathways are important in the regulation of both lower urinary tract and sexual function, and their interruption in neurological pathologies predictably results in variable urogenital dysfunction, depending mainly on the level of the lesion. A normal neurological examination of a patient with urogenital complaints should exclude an underlying neurological pathology, and the neurologist should become involved in the management of symptoms. Electromyography can be of value in the diagnosis and management of cauda equina lesions and multiple system atrophy, but neurophysiological investigations are of no importance in the diagnosis of neurogenic **sexual dysfunction.**
Urodynamic studies have proven helpful in determining the type and management of lower urinary tract dysfunction. Oral anticholinergics usually combined with clean intermittent catheterizations are the

first-line treatment options for neurogenic lower urinary tract dysfunction, with intravesical treatments emerging as the main alternative in intractable incontinence. The availability of effective oral phosphodiesterase inhibitors has revolutionized the management of erectile dysfunction, but treatment of ejaculatory and orgasmic disorders as well as of female **sexual dysfunction** still remains problematic.

L64 ANSWER 5 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 2004143561 EMBASE
TITLE: Sildenafil citrate (Viagra®).
AUTHOR: Muneer A.; Ralph D.J.; Minhas S.
CORPORATE SOURCE: A. Muneer, Institute of Urology, London, United Kingdom
SOURCE: Journal of Drug Evaluation, (**2003**) Vol. 1, No. 7, pp. 225-246.
Refs: 101
ISSN: 1479-1137 CODEN: JDEOBF
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 028 Urology and Nephrology
029 Clinical Biochemistry
030 Pharmacology
036 Health Policy, Economics and Management
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
ENTRY DATE: Entered STN: 20040415
Last Updated on STN: 20040415

DATA NOT AVAILABLE FOR THIS ACCESSION NUMBER

L64 ANSWER 6 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 2004143238 EMBASE
TITLE: [**Sexual dysfunction** in andrological practice].
SEXUALSTORUNGEN IN DER ANDROLOGISCHEN PRAXIS.
AUTHOR: Kohn F.-M.
CORPORATE SOURCE: Dr. F.-M. Kohn, Klin./Poliklinik Dermatol./Allergol., Biederstein TU Munchen, Biedersteiner Strasse 29, D-80802 Munchen, Germany
SOURCE: Kosmetische Medizin, (**2003**) Vol. 24, No. 5-6, pp. 188-193.
ISSN: 1430-4031 CODEN: KMOEA6
COUNTRY: Germany
DOCUMENT TYPE: Journal; Article
FILE SEGMENT: 003 Endocrinology
010 Obstetrics and Gynecology
028 Urology and Nephrology
030 Pharmacology
037 Drug Literature Index
LANGUAGE: German
SUMMARY LANGUAGE: German; English
ENTRY DATE: Entered STN: 20040415
Last Updated on STN: 20040415

AB The majority of men suffering form male infertility do not spontaneously report about **sexual dysfunctions.** Therefore, it is important to focus the medical and adrological history not only on factors associated with reduced semen quality but also on sexual functions.

Recent Studies have shown that many men attending their general practitioner want to talk about symptoms such as erectile dysfunction or premature ejaculation but feel ashamed to do so. They would be happy if their physicians would actively ask them for sexual problems. The most frequently occuring **sexual dysfunction** is premature ejaculation. In addition, erectile dysfunction, reduced sexual desire, anorgasmia and painful sexual intercourse should be considered.

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ACCESSION NUMBER: 2004048435 EMBASE
TITLE: Lower Urinary Tract Disorders - Ray Fuller Symposium Physiology, Pharmacology and Therapeutic Approaches 6-7 July 2002, San Francisco, CA, USA.
AUTHOR: Michel M.C.
CORPORATE SOURCE: M.C. Michel, University of Essen, Nephrol Lab IG1, Hufelandstrasse 55, 45122 Essen, Germany. martin.michel@uni-essen.de
SOURCE: IDrugs, (**2002**) Vol. 5, No. 8, pp. 792-796. ISSN: 1369-7056 CODEN: IDRUFN
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; Conference Article
FILE SEGMENT: 028 Urology and Nephrology
037 Drug Literature Index
030 Pharmacology
038 Adverse Reactions Titles
029 Clinical Biochemistry
010 Obstetrics and Gynecology
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20040212
Last Updated on STN: 20040212

AB This symposium focused on three urogenital disease states, namely benign prostatic hyperplasia (BPH), overactive bladder (OAB) and **sexual dysfunction.** Recently released data suggest that α-blockers not only reduce BPH symptoms, but also slow the progression of the disease in a quantitatively similar way to 5α-reductase inhibitors. These data were obtained from the Medical Therapy of Prostatic Symptoms (MTOPS) study, sponsored by the National Institutes of Health (NIH), which tested whether finasteride and doxazosin, alone or in combination, could further delay or prevent further prostate growth in men with BPH. While muscarinic receptor antagonists are the only clinically proven mechanism in the treatment of OAB, their long-term use remains limited by side effects, particularly dry mouth. Alternative therapeutic principles, including agonists at vanilloid receptors and potassium channel openers, or antagonists at P2X purinergic receptors or NK(1) tachykinin receptors, are being pursued. The treatment of erectile dysfunction (ED) by the phosphodiesterase (PDE) inhibitor sildenafil is clinically successful for many patients, and other PDE inhibitors such as vardenafil and tadalafil are in late stages of clinical development. Alternative peripherally acting therapeutic principles, including direct activators of guanylyl cyclase or local gene therapy using transfection with potassium channels, are being investigated. The centrally acting dopamine receptor agonist apomorphine, has recently been released in several countries. .COPYRGT. PharmaPress Ltd.

L64 ANSWER 8 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 2003508277 EMBASE

TITLE: Emerging therapies for female **sexual dysfunction.**
AUTHOR: Segraves R.T.
CORPORATE SOURCE: Dr. R.T. Segraves, Department of Psychiatry, MetroHealth Medical Center, 2500 Metrohealth Drive, Cleveland, OH 44109-1998, United States. Rsegraves@metrohealth.org
SOURCE: Expert Opinion on Emerging Drugs, (**2003**) Vol. 8, No. 2, pp. 515-522.
Refs: 50
ISSN: 1472-8214 CODEN: EOEDA3
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 010 Obstetrics and Gynecology
030 Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20040122
Last Updated on STN: 20040122

AB Epidemiological studies in the US, the UK and Sweden indicate that .apprx.40% of women aged 18-59 have significant complaints about their sexual lives. The majority of complaints concern low sexual desire. Other common problems include difficulty reaching orgasm, insufficient lubrication and painful coitus. A vacuum erection device which increases blood flow to the clitoris has been approved by the US Food and Drug Administration. There are no pharmacological agents with approval for the treatment of female **sexual dysfunction.** Phosphodiesterase inhibitors and other drugs which cause genital vasocongestion in women appear to have minimal clinical efficacy. Although many of these agents increase the vasocongestive response to sexual stimulation, there is minimal correlation between subjective and objective measures of sexual arousal in women. Trials with androgens have clearly and convincingly demonstrated that supraphysiological doses of testosterone increase libido in postmenopausal women. The long-term safety of such doses is unclear. To date, no studies have shown lower doses of androgens to be beneficial. There have been minimal studies of drugs targeting the central nervous system to date. Bupropion may have a beneficial effect on orgasm attainment in women with hypoactive sexual desire disorder.

L64 ANSWER 9 OF 32 EMBASE
on STN
ACCESSION NUMBER: 2003447900 EMBASE
TITLE: Erectile-dysfunction therapies. Market indicators.
AUTHOR: Renaud R.C.; Xuereb H.
CORPORATE SOURCE: R.C. Renaud, Bear Stearns and Co., 383 Madison Avenue, New York, NY 10179, United States. rrenaud@bear.com
SOURCE: Nature Reviews Drug Discovery, (**2002**) Vol. 1, No. 9, pp. 663-664.
Refs: 3
ISSN: 1474-1776 CODEN: NRDDAG
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; Note
FILE SEGMENT: 028 Urology and Nephrology
030 Pharmacology
036 Health Policy, Economics and Management
037 Drug Literature Index
038 Adverse Reactions Titles

LANGUAGE: English
ENTRY DATE: Entered STN: 20031120
Last Updated on STN: 20031120
DATA NOT AVAILABLE FOR THIS ACCESSION NUMBER

L64 ANSWER 10 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2003424449 EMBASE
TITLE: Tadalafil: A Viewpoint.
AUTHOR: McMahon C.G.; Porst H.
CORPORATE SOURCE: C.G. McMahon, Australian Centre for Sexual Health, St. Luke's Hospital, Sydney, NSW, Australia
SOURCE: Drugs, (**2003**) Vol. 63, No. 20, pp. 2213-2214.
ISSN: 0012-6667 CODEN: DRUGAY
COUNTRY: New Zealand
DOCUMENT TYPE: Journal; Note
FILE SEGMENT: 028 Urology and Nephrology
030 Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
ENTRY DATE: Entered STN: 20031106
Last Updated on STN: 20031106
DATA NOT AVAILABLE FOR THIS ACCESSION NUMBER

L64 ANSWER 11 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2003419551 EMBASE
TITLE: Novel agents for **sexual dysfunction.**
AUTHOR: Hopps C.V.; Mulhall J.P.
CORPORATE SOURCE: Dr. J.P. Mulhall, Department of Urology, Weill Med. Coll. of Cornell Univ., New York Presbyterian Hospital, 525 East 68th Street, New York, NY 10021, United States. jpm2005@med.cornell.edu
SOURCE: BJU International, (**2003**) Vol. 92, No. 6, pp. 534-538.
Refs: 26
ISSN: 1464-4096 CODEN: BJINFO
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; (Short Survey)
FILE SEGMENT: 028 Urology and Nephrology
030 Pharmacology
036 Health Policy, Economics and Management
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
ENTRY DATE: Entered STN: 20031030
Last Updated on STN: 20031030
DATA NOT AVAILABLE FOR THIS ACCESSION NUMBER

L64 ANSWER 12 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2003406484 EMBASE
TITLE: New achievements and pharmacotherapeutic approaches to impotence in the elderly.
AUTHOR: Frajese G.; Pozzi F.
CORPORATE SOURCE: Dr. G. Frajese, Dipartimento di Medicina Interna, Universita di Roma Tor Vergata, Via di Tor Vergata 135, 00133 Roma, Italy. gfraj@flashnet.it

SOURCE: Aging - Clinical and Experimental Research, (2003) Vol. 15, No. 3, pp. 222-233.
Refs: 117
ISSN: 1594-0667 CODEN: AGNGET
COUNTRY: Italy
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 020 Gerontology and Geriatrics
028 Urology and Nephrology
030 Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20031023
Last Updated on STN: 20031023

AB Erectile dysfunction (ED) has a negative impact on the quality of life of elderly men, but impotence is not an absolute concomitant of aging. Aging changes influencing sexual function in men consist of a decreased capacity to reach arousal by imagination or view, fragility of erection, and an increase in the refractory period. These events may be part of the andropause syndrome, which includes a decrease in intellectual activity, fatigue, depression, decreases in body hair, lean body mass and bone mineral density, accompanied by an increase in weight. As a consequence, the overlap of aging processes, concurrent diseases and social situations to which elderly men are subject, results in the great variability reported in epidemiological studies. In the same way, the complex physiology of erection depends on the social, environmental, or physical context in which it occurs. New achievements in research on intracellular mechanisms of erection and on the neuroendocrinology of aging contribute to better understanding the pathophysiology of ED in the elderly. For example, testosterone declines with age with great interindividual variability, since other hormonal changes are also involved. What currently can be easily identified is the alteration of LH-testosterone feedback alterations, although hormone levels fall in the normal range. Nevertheless, the extent to which age-dependent decline in hormones leads to health problems that may affect the quality of life remains to be clarified. Several concepts on aging-related processes have been challenged, and conditions that were once accepted as physiologically age-related are now thought to lead to medical problems, but until now erectile dysfunction remains underreported, underdiagnosed, and undertreated, especially in the elderly. Nowadays, we are witnessing a rapid growth in available pharmacotherapies, from intracavernous injections of vasoactive drugs, to powerful new oral agents, with differing pharmacological dynamic and kinetic properties. New options for treatment are therefore possible, taking into account both the possibility of changing ineffective drugs and augmenting efficacy by means of synergistic associations. This rich generation of progress is certainly contributing to a better medical approach to sexuality in aging people. .COPYRGT. 2003, Editrice Kurtis.

ACCESSION NUMBER: 2003403005 EMBASE
TITLE: American Urological Association - 97th Annual Meeting: Progress in **sexual dysfunction**: 25-30 May 2002, Orlando, FL, USA.
AUTHOR: Susman E.
CORPORATE SOURCE: E. Susman, Edward Susman Associates, Suite 222-35, 3111 S. Dixie Highway, West Palm Beach, FL 33405, United States.

70317.410@compuserve.com
SOURCE: IDrugs, (2002) Vol. 5, No. 7, pp. 666-669.
ISSN: 1369-7056 CODEN: IDRUFN
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; Conference Article
FILE SEGMENT: 028 Urology and Nephrology
010 Obstetrics and Gynecology
030 Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20031023
Last Updated on STN: 20031023
AB Although major breakthroughs in the treatment of urologicial disorders were few at the centennial anniversary meeting of the American Urological Association, researchers demonstrated that real progress was achievable in most areas of study, especially in improving treatment of prostatitis, benign prostatic hyperplasia and erectile dysfunction. Treatment for prostate cancer, especially hormone refractory prostate cancer, continues to challenge researchers.

L64 ANSWER 14 OF 32 EMBASE
on STN
ACCESSION NUMBER: 2003367171 EMBASE
TITLE: Phosphodiesterase 5 inhibitors in male **sexual dysfunction.**
AUTHOR: Kuthe A.
CORPORATE SOURCE: Dr. A. Kuthe, University of Fribourg, Department of Biochemistry, Rue du Musee 5, 1700 Fribourg, Switzerland. akuethe@gmx.de
SOURCE: Current Opinion in Urology, (2003) Vol. 13, No. 5, pp. 405-410.
Refs: 48
ISSN: 0963-0643 CODEN: CUOUEQ
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 006 Internal Medicine
028 Urology and Nephrology
037 Drug Literature Index
038 Adverse Reactions Titles
048 Gastroenterology
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20030925
Last Updated on STN: 20030925
AB Purpose of review: Phosphodiesterase 5 inhibitors are preferred by most men for the oral treatment of erectile dysfunction. In many guidelines, this therapy is recommended as first-line therapy because of convenience, high efficacy, and low rates of side-effects. Sildenafil was the first drug for the treatment of erectile dysfunction, introduced in 1998. There are now two new phosphodiesterase 5 inhibitors, vardenafil and tadalafir, for which approval was recently given in the European Union and is expected this year in the United States. Recent findings: Sildenafil has proved to be a very effective medicinal product. According to initial studies, vardenafil and tadalafil have demonstrated efficacy comparable to that of sildenafil. However, fewer data are available evaluating the adverse effects of vardenafil and tadalafil, particularly on their long-term use and their use in high-risk groups. Interestingly,

vardenafil and tadalafil have a higher potency than sildenafil. Moreover, the long life of tadalafil has been associated with an erectogenic potential of the drug lasting for more than 24 h. The advantage of this is the possibility of a patient engaging in sexual activity more than once after a single administration of the drug. Summary: In the future, in addition to sildenafil, the new phosphodiesterase 5 inhibitors vardenafil and tadalafil will play an important role in the management of erectile dysfunction, depending on the patient's health profile. .COPYRGT. 2003 Lippincott Williams & Wilkins.

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ACCESSION NUMBER: 2003366166 EMBASE
TITLE: Hypogonadism and erectile dysfunction: The role for testosterone therapy.
AUTHOR: Shabsigh R.
CORPORATE SOURCE: Dr. R. Shabsigh, Department of Urology, Columbia University, Columbia-Presbyterian Medical Center, 161 Fort Washington Avenue, New York, NY 10032, United States. rs66@columbia.edu
SOURCE: International Journal of Impotence Research, (2003) Vol. 15, No. SUPPL. 4, pp. S9-S13.
Refs: 32
ISSN: 0955-9930 CODEN: IJIRFB
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 003 Endocrinology
017 Public Health, Social Medicine and Epidemiology
028 Urology and Nephrology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20031002
Last Updated on STN: 20031002

AB The role of low testosterone levels in erectile dysfunction (ED) remains unclear. Both organic and psychogenic factors contribute to ED, with vasculogenic causes being the most common etiology. Approximately 10-20% of patients with ED are diagnosed with hormonal abnormalities. At the physiologic level, two second messenger systems are involved in mediating erections, one involving cyclic adenosine monophosphate (cAMP) and the other involving cyclic guanosine monophosphate (cGMP). **PDE5** inhibitors such as sildenafil promote the cGMP pathway, while alprostadil affects the cAMP pathway. Evidence is strong that, in animal systems, testosterone has direct effects on erectile tissue. However, although testosterone clearly has an impact on libido in humans, its effect on penile function is less clear. Evaluation of ED includes medical, sexual, and psychosocial history assessments, as well as laboratory tests to check for diabetes and hormonal abnormalities. Initial interventions should involve correction of potentially reversible causes of ED, such as hypogonadism. First-line therapy for other patients is typically oral **PDE5** inhibitors, such as sildenafil, tadalafil, or vardenafil. For patients who fail treatment with **PDE5** inhibitors, local therapies such as intracavernous alprostadil are highly successful. Recent data also support the success of combination therapy with sildenafil and testosterone. This opens the possibility of other combinations of testosterone and other treatments of ED. The ability to exploit multiple pathways in the physiologic processes leading to erection may help improve therapy for ED.

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ACCESSION NUMBER: 2003310194 EMBASE
TITLE: Erectile dysfunction: An overview.
AUTHOR: Morales A.
CORPORATE SOURCE: moralesa@post.queensu.ca
SOURCE: Clinics in Geriatric Medicine, (**2003**) Vol. 19, No. 3, pp. 529-538.
Refs: 41
ISSN: 0749-0690 CODEN: CGMEE6
PUBLISHER IDENT.: S 0749-0690(02)00104-0
COUNTRY: United States
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 017 Public Health, Social Medicine and Epidemiology
028 Urology and Nephrology
030 Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20030821
Last Updated on STN: 20030821

AB The treatment of male **sexual dysfunction** in the elderly offers special challenges. Commonly, these men have other conditions requiring medical treatment and the possibility of adverse drug interactions is common. Similarly, the severity of dysfunction is frequently increased by alteration in various organ systems. For instance, ED is commonly associated with significant cardiovascular problems and hormonal alterations. The treatment of these men requires familiarity with the various options available and good clinical judgment to determine when and how modification of therapeutic regimens and combinations of specific drugs may provide the best responses. Frequently one hears the embarrassed older man coming for a consultation and stating that, "At my age, I should not be thinking of this." It is imperative to remember that advancing age does not preclude sexual interest and desire for performance. A well-informed, understanding physician can provide sound advice, institute appropriate therapies, and organize intelligent referrals.

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ACCESSION NUMBER: 2003310191 EMBASE
TITLE: Disorders of male sexual function.
AUTHOR: Mulligan T.; Reddy S.; Gulur P.V.; Godschalk M.
CORPORATE SOURCE: Dr. T. Mulligan, McGuire VA Medical Center, 1201 Broad Rock Boulevard, Richmond, VA 23249, United States.
thomas.mulligan@med.va.gov
SOURCE: Clinics in Geriatric Medicine, (**2003**) Vol. 19, No. 3, pp. 473-481.
Refs: 12
ISSN: 0749-0690 CODEN: CGMEE6
PUBLISHER IDENT.: S 0749-0690(02)00115-5
COUNTRY: United States
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 020 Gerontology and Geriatrics
028 Urology and Nephrology
030 Pharmacology
037 Drug Literature Index

038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20030821
Last Updated on STN: 20030821

AB Sexuality remains an important issue in the older population. In spite of a decreased ability to achieve an erection, there is continued sexual desire. Many studies suggest that erectile dysfunction in the aged is primarily caused by age-associated chronic disease rather than normal, healthy aging. Therefore, preventive measures that are aimed at the underlying diseases should be sought. Nevertheless, effective treatment options are now available to successfully regain sexual function and thereby, improve quality of life.

L64 ANSWER 18 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2003293472 EMBASE
TITLE: Female **sexual dysfunction**: Potential for pharmacotherapy.
AUTHOR: Fourcroy J.L.
CORPORATE SOURCE: Dr. J.L. Fourcroy, 6310 Swords Way, Bethesda, MD 20817, United States. Fourcroy@aol.com
SOURCE: Drugs, (**2003**) Vol. 63, No. 14, pp. 1445-1457.
Refs: 77
ISSN: 0012-6667 CODEN: DRUGAY
COUNTRY: New Zealand
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 010 Obstetrics and Gynecology
032 Psychiatry
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20030731
Last Updated on STN: 20030731

AB The act of sex includes a woman's sexual self and self-image, intimate relationships, family, society and culture. The complexities of her environment, sexual and partner history, past relationships, mental health status, current medical problems and hormonal status all play a role. An interdisciplinary consensus conference panel expanded the former Diagnostic and Statistical Manual of Mental Disorders-IV classifications of female **sexual dysfunction** to include psychogenic and organic causes of desire, arousal, orgasm and sexual pain disorders that cause personal distress. The US FDA Guidance paper details the recommendations for the clinical development of drugs for the treatment of female **sexual dysfunction.** In this document, great emphasis is placed on orgasm as a clinical trial endpoint and it would appear that satisfactory sexual intercourse is of secondary importance to the Agency. However, there is no evidence to suggest that the majority of women correlate their sexual enjoyment and satisfaction with numbers of orgasms or even the likelihood of orgasm during a given sexual interaction. Nonetheless, any drug coming through the regulatory agency in the US will need to follow these recommendations. Currently, there are six major pharmaceutical therapeutic paths being pursued for treatment of female sexual disorders and/or postmenopausal symptoms. These include dopaminergic agonists and related substances, melanocortin-stimulating hormones, adrenoceptor antagonists, nitric oxide delivery systems, prostaglandins, and androgens. A number of compounds that target these pathways are undergoing development for female **sexual**

dysfunction. The array of pharmacological agents that are being developed for female **sexual dysfunction** must prove to be efficacious and have a good safety profile at a time when there are increasing worries that hormonal replacement with estrogen and progestogens are not safe. It is unclear if any of these pharmaceutical pathways will prove to be both safe and effective for the treatment of female sexual disorders; however, studies investigating this area will provide important scientific data for the future.

L64 ANSWER 19 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2003179247 EMBASE
TITLE: The year's new drugs.
AUTHOR: Graul A.I.
SOURCE: Drug News and Perspectives, (**2003**) Vol. 16, No. 1, pp. 22-39.
ISSN: 0214-0934 CODEN: DNPEED
COUNTRY: Spain
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 030 Pharmacology
036 Health Policy, Economics and Management
037 Drug Literature Index
038 Adverse Reactions Titles
039 Pharmacy
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20030519
Last Updated on STN: 20030519

AB The United States was the most active market for new product launches (22 products, 62.5%) in a year that saw 33 new chemical entities and biological drugs and two diagnostic agents reach their first markets. The most active therapeutic groups were antiinfective, oncolytic and metabolic drugs with five launches for each. .COPYRGT. 2003 Prous Science. All rights reserved.

L64 ANSWER 20 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2003168503 EMBASE
TITLE: Erectile dysfunction: Why drug therapy isn't always enough.
AUTHOR: Levine S.B.
CORPORATE SOURCE: Dr. S.B. Levine, Center for Marital and Sexual Health, 3 Commerce Park Square, Beachwood, OH 44122-5402, United States
SOURCE: Cleveland Clinic Journal of Medicine, (**1 Mar 2003**) Vol. 70, No. 3, pp. 241-246.
Refs: 13
ISSN: 0891-1150 CODEN: CCJMEL
COUNTRY: United States
DOCUMENT TYPE: Journal; Article
FILE SEGMENT: 028 Urology and Nephrology
032 Psychiatry
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20030519
Last Updated on STN: 20030519

AB We increasingly recognize that erectile dysfunction (ED) usually arises from a mix of organic and psychogenic causes, yet management of this

condition too often neglects the complexity of most cases of ED. While therapy with sildenafil and similar investigational drugs can play an important role in many cases of ED, physicians should recognize and try to address the psychological and interpersonal context in which ED exists in their patients.

L64 ANSWER 21 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2003146467 EMBASE
TITLE: [A **PDE 5** inhibitor with improved pharmacokinetics for the treatment of erectile dysfunction].
PDE-5-HEMMER MIT VERBESSERTER PHARMAKOKINETIK: WEIT GEHENDE RUCKKEHR ZUR NORMALITAT.
SOURCE: MMW-Fortschritte der Medizin, (**11 Mar 2003**) Vol. 145, No. 11, pp. 56-57.
ISSN: 1438-3276 CODEN: MFMEF8
COUNTRY: Germany
DOCUMENT TYPE: Journal; Conference Article
FILE SEGMENT: 028 Urology and Nephrology
030 Pharmacology
037 Drug Literature Index
LANGUAGE: German
ENTRY DATE: Entered STN: 20030417
Last Updated on STN: 20030417
DATA NOT AVAILABLE FOR THIS ACCESSION NUMBER

L64 ANSWER 22 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2003139717 EMBASE
TITLE: Phosphodiesterases as therapeutic targets.
AUTHOR: Lin C.-S.; Xin Z.-C.; Lin G.; Lue T.F.
CORPORATE SOURCE: Dr. C.-S. Lin, Department of Urology, Univ. of California, San Francisco, School of Medicine, 1657 Scott Street, San Francisco, CA 94115, United States
SOURCE: Urology, (**1 Apr 2003**) Vol. 61, No. 4, pp. 685-691.
Refs: 50
ISSN: 0090-4295 CODEN: URGYAZ
COUNTRY: United States
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 028 Urology and Nephrology
030 Pharmacology
036 Health Policy, Economics and Management
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
ENTRY DATE: Entered STN: 20030417
Last Updated on STN: 20030417
DATA NOT AVAILABLE FOR THIS ACCESSION NUMBER

L64 ANSWER 23 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2003136741 EMBASE
TITLE: Effective treatment of erectile dysfunction with vardenafil.
AUTHOR: Martin-Morales A.; Rosen R.C.
CORPORATE SOURCE: A. Martin-Morales, Unidad de Andrologia, Complejo Hospitalario Carlos Haya, Malaga, Spain.

amartinmorales@terra.es
SOURCE: Drugs of Today, (**1 Jan 2003**) Vol. 39, No. 1, pp. 51-59.
Refs: 23
ISSN: 0025-7656 CODEN: MDACAP
COUNTRY: Spain
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 028 Urology and Nephrology
030 Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20030417
Last Updated on STN: 20030417

AB Inhibitors of phosphodiesterase type 5 are playing a large role in the revolution in the treatment of **sexual dysfunction** that has taken place in recent years. The revolution was launched in 1998 with the introduction of a phosphodiesterase type 5 inhibitor, sildenafil, which opened up new avenues of investigation and greater recognition of the prevalence and various characteristics of these conditions. As more treatments with this and other mechanisms of action reach advanced stages of development and international markets, clinicians and patients alike are gaining confidence in the idea that **sexual dysfunction** can be successfully treated, and this, in turn inspires further research. While the efficacy of sildenafil has been striking, the drug is not effective and agreeable for all patients. Researchers have naturally sought to exploit this drug's mechanism of action in the hope that other agents can be found that are more selective, potent and tolerable. The etiology of **sexual dysfunction** is variable, as are its manifestations and the requirements patients have for therapy, and it is therefore likely that numerous treatments will be used to enhance sexual satisfaction in this population. Vardenafil, a new phosphodiesterase type 5 inhibitor, is an agent which has shown promise at each stage of development. The drug is currently in the third phase of clinical testing for the treatment of erectile dysfunction. .COPYRGT. Prous Science 2003. All rights reserved.

ACCESSION NUMBER: 2003134686 EMBASE
TITLE: What's new in sex therapy? From stagnation to fragmentation.
AUTHOR: Kleinplatz P.J.
CORPORATE SOURCE: P.J. Kleinplatz, 161 Frank Street, Ottawa, Ont. K2P 0X4, Canada. kleinpla@uottawa.ca
SOURCE: Sexual and Relationship Therapy, (**2003**) Vol. 18, No. 1, pp. 95-106.
Refs: 48
ISSN: 1468-1994 CODEN: SRTHBS
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 010 Obstetrics and Gynecology
028 Urology and Nephrology
038 Adverse Reactions Titles
036 Health Policy, Economics and Management
017 Public Health, Social Medicine and Epidemiology
037 Drug Literature Index
LANGUAGE: English

SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20030410
Last Updated on STN: 20030410

AB Three of the major trends in the field of sex therapy are reviewed. The first of these is the prevailing conception of sex therapy as the treatment of symptoms of **sexual dysfunctions** and disorders. The weak early, theoretical 'foundations' of sex therapy permitted the confounding of symptoms of sexual difficulties with underlying problems per se. This confusion has eventuated in the under-development of the field, now apparent in theory, research, practice and training. The second trend is the continuing and accelerating medicalization of sexuality, sexual problems and their treatment. Impressive advances in biomechanical and pharmacological methods are being embraced whether or not they apply to a science of human sexuality. Concurrently, market-driven obstacles to the growth of the field (e.g., the reluctance of HMOs to reimburse couples for treatment of relational problems) act as deterrents to studying and providing comprehensive treatment options. The third trend is the fragmentation of our field, such that both the nature of services provided and the profession itself are becoming increasingly splintered. The need for an interdisciplinary meeting ground for clinicians of diverse backgrounds is highlighted. These trends and their implications for sex therapy are explored.

L64 ANSWER 25 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2003082631 EMBASE
TITLE: [Long-acting tadalafil for the treatment of erectile dysfunction].
EREKTILE DYSFUNKION: TADALAFIL WIRKT LANGER.
AUTHOR: Becker C.
SOURCE: Pharmazeutische Zeitung, (**6 Feb 2003**) Vol. 148, No. 6, pp. 28-29.
ISSN: 0031-7136 CODEN: PZSED5
COUNTRY: Germany
DOCUMENT TYPE: Journal; (Short Survey)
FILE SEGMENT: 028 Urology and Nephrology
030 Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: German
ENTRY DATE: Entered STN: 20030306
Last Updated on STN: 20030306
DATA NOT AVAILABLE FOR THIS ACCESSION NUMBER

L64 ANSWER 26 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2003054213 EMBASE
TITLE: Bladder, bowel and **sexual dysfunction** in multiple sclerosis: Management strategies.
AUTHOR: DasGupta R.; Fowler C.J.
CORPORATE SOURCE: Dr. R. DasGupta, Department of Uro-Neurology, Natl. Hosp. for Neurol./Neurosurgery, Queen Square, London WC1N 3BG, United Kingdom
SOURCE: Drugs, (**2003**) Vol. 63, No. 2, pp. 153-166.
Refs: 74
ISSN: 0012-6667 CODEN: DRUGAY
COUNTRY: New Zealand
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 028 Urology and Nephrology

037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20040220
Last Updated on STN: 20040220

AB Although patients with multiple sclerosis (MS) are likely to have problems with bladder, bowel and sexual function, these problems have often been neglected in the past. Bladder dysfunction produces symptoms of urgency, frequency and urge incontinence (due to bladder overactivity and incomplete emptying), and is found in up to 75% of patients with MS. The mainstay of drug treatment for neurogenic bladder overactivity is anticholinergic medication, although intravesical treatments have also been proposed, such as the vanilloids and botulinum toxin, as well as sublingual cannibanoids. There has been much progress with pro-erectile agents in recent years, notably the use of sildenafil citrate, which has been shown to be particularly efficacious in these patients. Other agents include apomorphine hydrochloride and newer phosphodiesterase 5 inhibitors; however, the efficacy of these drugs in patients with MS remains to be proven. Research in female **sexual dysfunction** is also progressing, although this aspect of patient well being has only recently been addressed; the reported development of a classification system for the condition is likely to help categorise future treatments. Unlike bladder and **sexual dysfunction**, there have been rather limited advances in the treatment of faecal incontinence and constipation specifically for patients with MS, despite a prevalence of up to 50%. This review highlights the strategies for these types dysfunction commonly seen in patients with MS, with report of recent pharmacological developments.

L64 ANSWER 27 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2002402358 EMBASE
TITLE: [New oral treatments for erectile dysfunction]. NOUVEAUX TRAITEMENTS ORAUX DE L'IMPUISSANCE.
AUTHOR: Schouman M.
CORPORATE SOURCE: M. Schouman, Andrologue-Urologue, Neuilly, France
SOURCE: Angeiologie, (**2002**) Vol. 54, No. 4, pp. 65-68.
Refs: 5
ISSN: 0003-3049 CODEN: AGLOA5
COUNTRY: France
DOCUMENT TYPE: Journal; (Short Survey)
FILE SEGMENT: 028 Urology and Nephrology
030 Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: French
SUMMARY LANGUAGE: English; French
ENTRY DATE: Entered STN: 20021121
Last Updated on STN: 20021121

AB Oral therapy is nowadays a very common treatment of erectile dysfunction. In this paper, we will review the available drugs and point out the advantages of those which will come on the market in the next future.

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ACCESSION NUMBER: 2002382628 EMBASE
TITLE: [Pharmacological treatment of **sexual dysfunction** in women].

FARMAKOLOGISK BEHANDLING AF SEKSUEL DYSFUNKTION HOS KVINDER.
AUTHOR: Hilmand C.B.; Gregersen N.; Giraldi A.G.E.
CORPORATE SOURCE: A.G.E. Giraldi, Klinisk Farmakologisk Afdeling 7642, Rigshospitalet, Blegdamsvej 9, DK-2100 Kobenhavn O, Denmark
SOURCE: Ugeskrift for Laeger, (**7 Oct 2002**) Vol. 164, No. 41, pp. 4794-4796.
Refs: 17
ISSN: 0041-5782 CODEN: UGLAAD
COUNTRY: Denmark
DOCUMENT TYPE: Journal; (Short Survey)
FILE SEGMENT: 010 Obstetrics and Gynecology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: Danish
ENTRY DATE: Entered STN: 20021114
Last Updated on STN: 20021114
DATA NOT AVAILABLE FOR THIS ACCESSION NUMBER

L64 ANSWER 29 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2002335130 EMBASE
TITLE: The work has just begun for urologists: Highlights from the 97th Annual Meeting of the American Urological Association, Orlando, Florida, May 25-30, 2002.
AUTHOR: Susman E.
CORPORATE SOURCE: E. Susman, 3111 S. Dixie Highway, West Palm Beach, FL 33405, United States. edsusman@bellsouth.net
SOURCE: Drugs of Today, (**2002**) Vol. 38, No. 8, pp. 521-531.
Refs: 39
ISSN: 0025-7656 CODEN: MDACAP
COUNTRY: Spain
DOCUMENT TYPE: Journal; Conference Article
FILE SEGMENT: 028 Urology and Nephrology
030 Pharmacology
037 Drug Literature Index
LANGUAGE: English
ENTRY DATE: Entered STN: 20021003
Last Updated on STN: 20021003
DATA NOT AVAILABLE FOR THIS ACCESSION NUMBER

L64 ANSWER 30 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2002214304 EMBASE
TITLE: Tadalafil: An oral selective phosphodiesterase 5 inhibitor for treatment of erectile dysfunction.
AUTHOR: Kim S.; Narayanan S.; Song J.C.
CORPORATE SOURCE: S. Kim, Department of Pharmacy Services, St. Joseph's Medical Center, Stockton, CA, United States
SOURCE: Formulary, (**2002**) Vol. 37, No. 6, pp. 289-296.
Refs: 27
ISSN: 1082-801X CODEN: FORMF
COUNTRY: United States
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 028 Urology and Nephrology
030 Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles

LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20020708
Last Updated on STN: 20020708

AB Tadalafil (IC351) is a selective inhibitor of phosphodiesterase 5 (**PDE5**) under FDA review for treatment of erectile dysfunction (ED) and diabetes-related ED. If approved, it will join the widely used **PDE5** inhibitor sildenafil citrate as an oral therapy for ED management. Placebo-controlled trials have shown tadalafil to be safe and effective at doses of 5 to 25 mg for treating ED and doses of 10 to 20 mg for treating diabetes-related ED. Tadalafil is rapidly absorbed, and patients have shown responsiveness (with multiple successful intercourse attempts) for up to 24 hours after administration. Tadalafil undergoes hepatic metabolism and is largely metabolized by the cytochrome P-450 3A4 isoenzyme. Headache and dyspepsia have been the most Common adverse effects reported with the drug. According to the results from the largest clinical trials conducted to date, tadalafil has produced no abnormal visual effects and no clinically significant changes in blood pressure or electrocardiographic parameters.

L64 ANSWER 31 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2002200169 EMBASE
TITLE: Sexual and urological dysfunction in multiple sclerosis: Better understanding and improved therapies.
AUTHOR: DasGupta R.; Fowler C.J.
CORPORATE SOURCE: R. DasGupta, Department of UroNeurology, Natl. Hosp. Neurol. and Neurosurg., Queen Square, London WC1N 3BG, United Kingdom. ranandg@yahoo.co.uk
SOURCE: Current Opinion in Neurology, (**2002**) Vol. 15, No. 3, pp. 271-278.
Refs: 58
ISSN: 1350-7540 CODEN: CONEEX
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 008 Neurology and Neurosurgery
028 Urology and Nephrology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 20020627
Last Updated on STN: 20020627

AB The fundamental strategy in treating multiple sclerosis patients with unstable bladders involves a combination of suppressing urgency and ensuring effective urinary drainage. Anti-cholinergics remain the first-line treatment, but alternative therapies are undergoing clinical trials. With a range of new proerectile oral medications available, interest has grown in treatment of multiple sclerosis-related erectile failure. Female **sexual dysfunction** is also now gaining some attention, with new classification criteria and methods for assessing and treating these patients. .COPYRGT. 2002 Lippincott Williams & Wilkins.

L64 ANSWER 32 OF 32 EMBASE COPYRIGHT 2005 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2002156479 EMBASE
TITLE: CNS-targeted **sexual dysfunction** drug for men and women.

AUTHOR: Clough J.
CORPORATE SOURCE: joanne.clough@drugdiscoverytoday.com
SOURCE: Drug Discovery Today, (**1 May 2002**) Vol. 7, No. 9, pp. 492-494.
Refs: 11
ISSN: 1359-6446 CODEN: DDTOFS
PUBLISHER IDENT.: S 1359-6446(02)02279-1
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; (Short Survey)
FILE SEGMENT: 008 Neurology and Neurosurgery
028 Urology and Nephrology
030 Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
ENTRY DATE: Entered STN: 20020516
Last Updated on STN: 20020516
DATA NOT AVAILABLE FOR THIS ACCESSION NUMBER